

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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of LA

5. Covering Period 10 14 2010 through 11 22 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 04 28 2011

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)

A. Form/Schedule : **F3XA**
Transaction ID :

This amendment is filed in response to FEC letter dated March 24, 2011. See Form 99 text filed as part of the amendment.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Republican Party of Louisiana

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		110806.29
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	312735.41									
(c) Total Receipts (from Line 19)	267342.30	752855.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	580077.71	863661.91								
7. Total Disbursements (from Line 31)	517983.25	801567.45								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62094.46	62094.46								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	87341.51									

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**

Write or Type Committee Name
Republican Party of Louisiana

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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)	147659.07	443582.87
(ii) Unitemized	2964.17	35886.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	150623.24	479469.61
(b) Political Party Committees	0.00	2098.00
(c) Other Political Committees (such as PACs)	500.00	26550.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	151123.24	508117.61
12. Transfers From Affiliated/Other Party Committees	95000.00	112600.00
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)	12554.07	18496.78
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)	8664.99	107883.73
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8664.99	107883.73
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	267342.30	752855.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	258677.31	644971.89

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.....	2303.35	28677.99
(ii) Non-Federal Share.....	8664.99	107883.73
(b) Other Federal Operating Expenditures.....	17155.49	121678.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	28123.83	258240.22
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).....	438027.55	438027.55
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	51831.87	104799.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	51831.87	104799.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	517983.25	801567.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	509318.26	693683.72

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)	151123.24	508117.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	151123.24	508117.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19458.84	150356.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	12554.07	18496.78
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6904.77	131859.71

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

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

FOR LINE NUMBER: PAGE 7 / 84
(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)
Wanda Aizpurua

Mailing Address 18312 N. Mission Hills Ave.

City State Zip Code
Baton Rouge LA 70810-7972

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Baton Rouge Vice President Region 6

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.98

Date of Receipt M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: A84E2C9A7A9354BE1B60

Amount of Each Receipt this Period 39.00

Generic Donation Republican Leadership Summit

B. Full Name (Last, First, Middle Initial)
Jeff Loftin

Mailing Address 6007 Financial Plz Suite 215

City State Zip Code
Shreveport LA 71129-2675

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Edgear, LLC Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 14 / 2010

Transaction ID: A29D5848DE7A6401DAE4

Amount of Each Receipt this Period 1000.00

Generic Sponsor Rep Ldshp Summit

C. Full Name (Last, First, Middle Initial)
Mr. Emile B Cordaro

Mailing Address 428 Travis St

City State Zip Code
Shreveport LA 71101-3105

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
American Electric Power manager Gov Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
10 / 15 / 2010

Transaction ID: AC80A1D7047C84091A01

Amount of Each Receipt this Period 1000.00

Gen Sponsor Rep Ldshp Summit

SUBTOTAL of Receipts This Page (optional) 2039.00

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 8 / 84
(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

<p>A. Full Name (Last, First, Middle Initial) Mr. Harold C Patin</p> <p>Mailing Address 4713 Trenton St</p> <p>City State Zip Code <u>Metairie</u> LA 70006-6517</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Global Safety and Security Inc</p> <p>Occupation President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0</p> <p>Transaction ID: A634D6209781B4A9785D</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Generic Sponsor Rep Ldshp Summit</p>
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<p>B. Full Name (Last, First, Middle Initial) Mrs. Ruth Ulrich</p> <p>Mailing Address 406 Forsythe Avenue</p> <p>City State Zip Code <u>Monroe</u> LA 71201-4008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Out Of The Box Designs</p> <p>Occupation Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1103.49</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Transaction ID: A622F43986610461F9FD</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Generic Trust monthly</p>
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<p>C. Full Name (Last, First, Middle Initial) Dr. Keith Desonier, Jr.</p> <p>Mailing Address 917 Contraband Ln</p> <p>City State Zip Code <u>Lake Charles</u> LA 70605-1434</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer</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 ▼ 3000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0</p> <p>Transaction ID: A1A217417CC61453C97E</p> <p>Amount of Each Receipt this Period 400.00</p> <p>Foundation</p>
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SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 84

(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)
Mrs. Alice Munger

Mailing Address 2729 Constance St

City State Zip Code
New Orleans LA 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 ▼ 1000.00

Date of Receipt MM / DD / YYYY
10 / 20 / 2010

Transaction ID: A7BF5946F9819443CA78

Amount of Each Receipt this Period 100.00

Generic TRust monthly

B.

Full Name (Last, First, Middle Initial)
Mr. R E 'Bob' Miller

Mailing Address PO Box 3616

City State Zip Code
Morgan City LA 70381-3616

FEC ID number of contributing federal political committee. C

Name of Employer Major Equipment Petrol Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 8000.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: AF6DD91A28E0342BA869

Amount of Each Receipt this Period 5000.00

C.

Full Name (Last, First, Middle Initial)
Dr. Lacy Williams

Mailing Address 7 Cliffewood Place

City State Zip Code
Shreveport LA 71106-7703

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 ▼ 5000.00

Date of Receipt MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A9DCB92F8FF014880B4E

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) 10100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 84
	<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) Joe D. Niswanger		Date of Receipt	
	Mailing Address 2201 Marie Place		M M / D D / Y Y Y Y 10 / 25 / 2010	
	City	State	Zip Code	Transaction ID: AE94BA9C6868A494E842
	Monroe	LA	71201-3415	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer MTP Drivetrain		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		5000.00		

B.	Full Name (Last, First, Middle Initial) Mr. Jon Khachaturian		Date of Receipt	
	Mailing Address 5427 Sutton Place		M M / D D / Y Y Y Y 10 / 25 / 2010	
	City	State	Zip Code	Transaction ID: AC18AD5119DAC4746AF7
	New Orleans	LA	70131-5412	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer Versabar, Inc.		Occupation Civil Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		5000.00		

C.	Full Name (Last, First, Middle Initial) Ufuk Tuncer		Date of Receipt	
	Mailing Address 1201 Canal St. Apt 513		M M / D D / Y Y Y Y 10 / 25 / 2010	
	City	State	Zip Code	Transaction ID: AB7B563364ACF4B7A8D5
	New Orleans	LA	70112-2675	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		1000.00		
Name of Employer Prestige Commercial Clean- ing		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1700.00		

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
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 / 84
(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)
Ufuk Tuncer

Mailing Address 1201 Canal St.
Apt 513

City State Zip Code
New Orleans LA 70112-2675

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

Name of Employer Occupation
Prestige Commercial Clean- ing Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: A9BCAE2EC962F4613B6E

Amount of Each Receipt this Period
700.00

B.

Full Name (Last, First, Middle Initial)
James Madden

Mailing Address 960 Beechwood Dr

City State Zip Code
Lake Charles LA 70611-6818

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

Name of Employer Occupation
Madden Contracting Co Inc Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: A23ABAD7C09CD49948D5

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Otto Candies, Jr.

Mailing Address PO Box 25

City State Zip Code
Des Allemands LA 70030-0025

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

Name of Employer Occupation
Otto Candies, Llc Chairman CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: A6C9D4F6793234495AA1

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **10700.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 84
(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)
Russell Plaisance

Mailing Address 126 W. 103rd St

City State Zip Code
Cut Off LA 70345-3558

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

Name of Employer Louisiana Carriers, LLC Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: ACCF1682E38EC4B6C8DB
Amount of Each Receipt this Period: 4000.00

B.

Full Name (Last, First, Middle Initial)
Dieter Hugel

Mailing Address 7351 W. Roadway St

City State Zip Code
Metairie LA 70002

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

Name of Employer Ocean Marine Indemnity Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: A4DB117E8EDB642698A9
Amount of Each Receipt this Period: 5000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Polito

Mailing Address 2968 Bocage Lake Ct

City State Zip Code
Baton Rouge LA 70809-1053

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

Name of Employer Mapp Construction, Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: A7D242A064EEC46209D2
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► 14000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 84
(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)
Mr. James F. Justiss

Mailing Address PO Box 2990

City State Zip Code
Jena LA 71342-2990

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

Name of Employer Justiss Oil Co Inc Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A89FE4137EBD7400A8B0

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph Rault

Mailing Address 110 Veterans Blvd. Ste 110

City State Zip Code
Metairie LA 70005-3023

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

Name of Employer Rault Resources Group Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: AA25255CFB92A488AAA9

Amount of Each Receipt this Period
3000.00

C.

Full Name (Last, First, Middle Initial)
William Clifford Smith

Mailing Address PO Box 2266

City State Zip Code
Houma LA 70361-2266

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

Name of Employer T Baker Smith Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A2A491556C53B472AAF2

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **10500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 84
(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)
Ms. Phyllis M. Taylor

Mailing Address One Lee Circle

City State Zip Code
New Orleans LA 70130-3931

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

Name of Employer Occupation
Taylor Energy Co. Chairman Of The Board

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: AE6142D20D7514BBC826

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Adem Ozel

Mailing Address 3603 Ole Miss Dr

City State Zip Code
Kenner LA 70065-2513

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

Name of Employer Occupation
Capland Embroidering Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A916246B44C19417C901

Amount of Each Receipt this Period
1750.00

C.

Full Name (Last, First, Middle Initial)
Michele Cooper

Mailing Address 106 Fontainebleau Dr

City State Zip Code
Mandeville LA 70471-6419

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

Name of Employer Occupation
Self Plastic Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A21699CCE4267431184D

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **11750.00**

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 15 / 84
(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)
Tracy W Krohn

Mailing Address 9 Greenway Plaza
Wuite 300

City Houston State TX Zip Code 77046-0901

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

Name of Employer W&T Offshore Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A0C32B75F48304AF9BDC

Amount of Each Receipt this Period
10000.00

B.

Full Name (Last, First, Middle Initial)
Talha Ozger

Mailing Address 6700 Blanke St

City Metairie State LA Zip Code 70003-2925

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

Name of Employer Smyrna, LLC Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: AD1498F5899F44BAEBF4

Amount of Each Receipt this Period
1500.00

C.

Full Name (Last, First, Middle Initial)
Mustafa Ozger

Mailing Address 6700 Blanke St

City Metairie State LA Zip Code 70003-2925

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

Name of Employer Smyrna, LLC Occupation Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: A546DCF145B924F059D1

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **13000.00**

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 / 84
	<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) Yavuz S Ozger		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address 3102 St. Charles		Transaction ID: A437618A541D14AA8A3D		
	City New Orleans	State LA	Zip Code 70115-4558	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Smyrna, LLC	Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

B.	Full Name (Last, First, Middle Initial) Tufan Pir		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address 4619 Grammer Ave		Transaction ID: AE314624D25FF4EA0B78		
	City Metairie	State LA	Zip Code 70001-3301	Amount of Each Receipt this Period 1250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Pir Enterprises, LLC	Occupation Partner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00			

C.	Full Name (Last, First, Middle Initial) Mr. William Henry Shane, Jr.		Date of Receipt MM / DD / YYYY 10 / 26 / 2010		
	Mailing Address 3925 N I-10 Service Road Ste 105		Transaction ID: A85D294D46B4946D2B4E		
	City Metairie	State LA	Zip Code 70002-6831	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self	Occupation Architect			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3100.00			

SUBTOTAL of Receipts This Page (optional)	▶	4250.00
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 17 / 84
	<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. Frank M. Stinson		Date of Receipt	
	Mailing Address PO Box 52008		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: A6C4C560F11DC4A3F89A
	Shreveport	LA	71135-2008	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		2500.00		
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 ▼		
		8300.00		

B.	Full Name (Last, First, Middle Initial) Dr. Richard Zepernick, Jr.		Date of Receipt	
	Mailing Address 823 Saint Philip St		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: A56793C7558234AC2960
	New Orleans	LA	70116-2419	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer Marlin Energy		Occupation President & C.E.O.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		5000.00		

C.	Full Name (Last, First, Middle Initial) Mr. John Stone, Jr.		Date of Receipt	
	Mailing Address 12266 Hwy 23		M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: A03E0D84E0403417DBB5
	Belle Chasse	LA	70037-4212	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		2000.00		
Name of Employer John W Stone Oil Distr LLC		Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2000.00		

SUBTOTAL of Receipts This Page (optional)	▶	9500.00
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 18 / 84
(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
							17

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.

Full Name (Last, First, Middle Initial)
Martin Svendson

Mailing Address 1919 Woodland Dr

City State Zip Code
Baton Rouge LA 70808-1936

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

Name of Employer Svendson Investments Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: AC08F81972A144E879BA

Amount of Each Receipt this Period
1000.00

Generic Repub Ldshp Summit

B.

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 B & G Food Ent., Inc Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: ABF4D0592C1AF4F5A90D

Amount of Each Receipt this Period
5000.00

Victory Funds

C.

Full Name (Last, First, Middle Initial)
Mr. Richard S Griffith

Mailing Address 3417 Milam St

City State Zip Code
Houston TX 77002-9531

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

Name of Employer Self Employed Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

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

Transaction ID: A0A91D77FCC524C69809

Amount of Each Receipt this Period
500.00

Generic Website

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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 19 / 84
	<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)
Joseph Dar Mooney

Mailing Address 301 Ripple Road

City State Zip Code
New Orleans LA 70123-1925

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

Name of Employer Occupation
Chemonics International Chief of Party

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
10 / 30 / 2010

Transaction ID: A37282298E0EA4F3CA8E

Amount of Each Receipt this Period
100.00

Generic Web Contribution

B.

Full Name (Last, First, Middle Initial)
Chinh Chu

Mailing Address 2401 Pleasant Valley

City State Zip Code
York PA 17402-9647

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

Name of Employer Occupation
The Blackstone Group Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: AD1F10D35E4EB4CEDA89

Amount of Each Receipt this Period
10000.00

Generic Donation

C.

Full Name (Last, First, Middle Initial)
W. Temple Webber

Mailing Address 2001 Kirby DR Ste 115

City State Zip Code
Houston TX 77019-6043

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

Name of Employer Occupation
Self Employed Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2010

Transaction ID: A77C0C3056C9E4574952

Amount of Each Receipt this Period
10000.00

Generic Donation

SUBTOTAL of Receipts This Page (optional) ► 20100.00

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 20 / 84
	<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) G. Michael Hollingsworth		Date of Receipt
	Mailing Address 7122 Moniteau Court		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Baton Rouge	LA	70809-1163
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Auto Dealer	Transaction ID: ACE27208809C44AAA90A
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="2500.00"/>	
			Amount of Each Receipt this Period <input type="text" value="2500.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Arlen Cenac, Jr.		Date of Receipt
	Mailing Address PO Box 2617		<input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Houma	LA	70361-2617
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Cenac Towing Company	Transaction ID: ABC3EC60310754CBDA84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="10000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="10000.00"/>

C.	Full Name (Last, First, Middle Initial) Mrs. Ruth Ulrich		Date of Receipt
	Mailing Address 406 Forsythe Avenue		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Monroe	LA	71201-4008
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Out Of The Box Designs		Occupation Owner	Transaction ID: A9AF6CAE03B7E45669E7
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1203.49"/>	
			Amount of Each Receipt this Period <input type="text" value="100.00"/>
			Generic Trust

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="12600.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 84
(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. William Bisland

Mailing Address 183 Aubrey Dr

City State Zip Code
Houma LA 70360-5907

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

Name of Employer Occupation
Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.70

Date of Receipt: 11 / 22 / 2010
Transaction ID: AF16A3547F8DC497CB67
Amount of Each Receipt this Period: 20.07
Generic Monthly Donation

B. Full Name (Last, First, Middle Initial)
Mrs. Alice Munger

Mailing Address 2729 Constance St

City State Zip Code
New Orleans LA 70130-5517

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 11 / 22 / 2010
Transaction ID: A836BBB45EEE64A8191D
Amount of Each Receipt this Period: 100.00
Generic Trust

C. Full Name (Last, First, Middle Initial)
Elle Investments, LLC

Mailing Address 600 Jefferson St.
Suite 1403

City State Zip Code
Lafayette LA 70501

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: A6DC0C985668F42508FB
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **5120.07**

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 22 / 84
	<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) Michel B Moreno		Date of Receipt
	Mailing Address 409 Worth Ave		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lafayette	LA	70508-6638
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Moreno Group, LLC		Occupation CEO	Transaction ID: ABFE64A5994BE45B2B34
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>	

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Eastland Holdings, LLC		Date of Receipt
	Mailing Address PO Box 13588		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	New Orleans	LA	70185
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: AC58776917B3646BFB05
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>	

C.	Full Name (Last, First, Middle Initial) G. Perry Eastman, III		Date of Receipt
	Mailing Address 500 Dakin St.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	New Orleans	LA	70121-4008
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Auto-Chor Services, LLC		Occupation Co-Chairman	Transaction ID: ADE212208C35D40B4B14
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>	

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 84
(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)
John M. Eastman

Mailing Address 500 Dakin St.

City State Zip Code
New Orleans LA 70121-4008

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

Name of Employer Occupation
Auto-Chor Services, LLC Co-Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: A4424AA80D8B5483C891

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	147659.07

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 84
	(check only one)	
<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)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) United Parcel Service PAC		Date of Receipt
	Mailing Address 55 Glenlake Pkwy, NE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Atlanta	GA	30328
	FEC ID number of contributing federal political committee.		<input type="text" value="C00064766"/>
Name of Employer		Occupation	Transaction ID: ADD5FA24AE79C43B8A51
Receipt For:		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="500.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 84
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<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) National Republican Congressional Committee		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 320 First St SE		Transaction ID: A02105E882EF647C8827
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 85000.00	
Name of Employer	Occupation	Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 85000.00	

B.

Full Name (Last, First, Middle Initial) Republican National Committee		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 310 First Street, SE		Transaction ID: ADF6CCB906CFD45AB9F6
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10000.00	
Name of Employer	Occupation	Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29698.00	

SUBTOTAL of Receipts This Page (optional)	▶	95000.00
TOTAL This Period (last page this line number only)	▶	95000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 84	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" 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) Advantage Inc.		Date of Receipt																				
Mailing Address 2300 Clarendon Blvd Suite 1004		<table border="1"><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>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	9	/	2	0	1	0													
City	State	Zip Code																				
Arlington	VA	22201																				
FEC ID number of contributing federal political committee. C		Transaction ID: AF9B8F04BBE6A441A8B6																				
Name of Employer		Amount of Each Receipt this Period 12554.07																				
Occupation		Refund of Expenses																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12554.07																					

SUBTOTAL of Receipts This Page (optional)	▶	12554.07
TOTAL This Period (last page this line number only)	▶	12554.07

**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)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Office Depot Credit Plan</p> <p>Mailing Address P. O. Box 9020</p> <p>City Des Moines State IA Zip Code 50368-9020</p> <p>Purpose of Disbursement GOTV Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB0BAF78C162A4CD2B56</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 110.64</p>
<p>B. Full Name (Last, First, Middle Initial) Crayon Campus</p> <p>Mailing Address 9715 Lawndale Dr</p> <p>City Baton Rouge State LA Zip Code 70818</p> <p>Purpose of Disbursement Employee Benefits</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B137E604337534CC5AB4</p> <p>Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 2167</p> <p>City Folsom State CA Zip Code 95763</p> <p>Purpose of Disbursement Cell Phone Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7AE6C9EA76C44BD0AA0</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 112.36</p>

SUBTOTAL of Disbursements This Page (optional)	498.00
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)

PAGE 28 / 84

<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

A.	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 GOTV Supplies 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: B7AF42C7DDD4649C087D Date of Disbursement 11 / 03 / 2010 Amount of Each Disbursement this Period 94.80 Category/Type
B.	Full Name (Last, First, Middle Initial) R&O's Pizza Mailing Address 216 Metairie Hammond Hwy City Metairie State LA Zip Code 70005 Purpose of Disbursement Payment of Debt 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: B0C813B779B6F415888E Date of Disbursement 11 / 04 / 2010 Amount of Each Disbursement this Period 352.93 Category/Type
C.	Full Name (Last, First, Middle Initial) Iberia Bank Mailing Address 3700 Essen Ln City Baton Rouge State LA Zip Code 70809-2134 Purpose of Disbursement Merchant Fees 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: B2510DC08F43B492084B Date of Disbursement 11 / 08 / 2010 Amount of Each Disbursement this Period 26.55 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

474.28

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Cybersource</p> <p>Mailing Address 1295 Charleston Road</p> <p>City Mountainview State CA Zip Code 94043</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BBF814521A44642128BD Date of Disbursement 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 64.95</p>
<p>B. Full Name (Last, First, Middle Initial) Aaron Baer</p> <p>Mailing Address 11155 Southfork Dr Apt 3023</p> <p>City Baton Rouge State LA Zip Code 70816</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1248DBB2804F4B92AC1 Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1731.39</p>
<p>C. Full Name (Last, First, Middle Initial) Karen Connolly</p> <p>Mailing Address 6880 Christopher Ave</p> <p>City Greenwell Springs State LA Zip Code 70739-4253</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5974606FFD8E451F852 Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1183.28</p>

SUBTOTAL of Disbursements This Page (optional)	2979.62
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)

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<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

A.

Full Name (Last, First, Middle Initial)

Will Vanderbrook Cpa

Mailing Address 2900 Clearview Pkwy
Suite 206

City Metairie State LA Zip Code 70006-6532

Purpose of Disbursement
pmt on debt acctg services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B5AFC877630414FABBCD

Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

13000.00

SUBTOTAL of Disbursements This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

16951.90

**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 31 / 84

<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Karen Connolly <hr/> Mailing Address 6880 Christopher Ave <hr/> City Greenwell Springs State LA Zip Code 70739-4253 <hr/> Purpose of Disbursement 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: B4ABB29E874224F83A9F Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1183.28
	Category/ Type
	Category/ Type
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 <hr/> 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: BD12DB08A506A4208AD8 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Jennifer Madsen <hr/> Mailing Address 20355 Charles Ory Dr <hr/> City Plaquemine State LA Zip Code 70764-5314 <hr/> 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: B88C54523FF1A46DCB93 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3683.28
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Aaron Baer <hr/> Mailing Address 11155 Southfork Dr Apt 3023 <hr/> City Baton Rouge State LA Zip Code 70816 <hr/> Purpose of Disbursement 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: BD84A768871974B50A37 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1731.39
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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 <hr/> 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: B72D2028F531746DCBD3 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Aaron Baer <hr/> Mailing Address 11155 Southfork Dr Apt 3023 <hr/> City Baton Rouge State LA Zip Code 70816 <hr/> Purpose of Disbursement 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: B721CDB6DBCDA4B5D9F0 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1731.39
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4712.78
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)

PAGE 33 / 84

<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Karen Connolly <hr/> Mailing Address 6880 Christopher Ave <hr/> City Greenwell Springs State LA Zip Code 70739-4253 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCEE67F20994347DBBD6 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1183.28
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) JW Food Mart <hr/> Mailing Address 561 S Vaughn <hr/> City Brusly State LA Zip Code <hr/> Purpose of Disbursement Auto Gas Victory Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B36F45D0C929F4D39B07 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 39.52
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Direct Mailing Services, Inc <hr/> Mailing Address 12562 N Lakeshore Dr <hr/> City Walker State LA Zip Code 70785 <hr/> Purpose of Disbursement Strategy Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B8FB18B9AEF8643058AE Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

4222.80

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)

PAGE 34 / 84

<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Watson Voice And Data <hr/> Mailing Address 727 High St <hr/> City Houma State LA Zip Code 70360 <hr/> Purpose of Disbursement Generic GOTV Early voting calls Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BDEB7249A9D3D4BB78CB Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Liquid Ventures <hr/> Mailing Address 12232 Industriplex Blvd Ste 1 <hr/> City Baton Rouge State LA Zip Code 70809-7105 <hr/> Purpose of Disbursement Management Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BEB271E9C9BF34654BF5 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 3500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Shell Oil Corporation <hr/> Mailing Address One Shell Square <hr/> City Houston State TX Zip Code 77002 <hr/> Purpose of Disbursement Auto Gas Victory Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B4B9BE16EA3AF480985C Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 32.36
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4532.36

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)

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<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

<p>A. Full Name (Last, First, Middle Initial) Watson Voice And Data</p> <p>Mailing Address 727 High St</p> <p>City Houma State LA Zip Code 70360</p> <p>Purpose of Disbursement Generic GOTV Early Voting calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BAA9C2EE5BD4F406A890</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 7519.92</p>
<p>B. Full Name (Last, First, Middle Initial) Hilton Hotels</p> <p>Mailing Address 7930 Jones Branch Dr Ste 1100</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Republican Leadership Summit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B046A2A3ED37F4A2A809</p> <p>Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1436.96</p>
<p>C. Full Name (Last, First, Middle Initial) LA Department of Revenue</p> <p>Mailing Address 617 N 3rd St.</p> <p>City Baton Rouge State LA Zip Code 70802-5428</p> <p>Purpose of Disbursement State Withholding</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B28A679555EB643F2933</p> <p>Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 264.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9220.88

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)

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<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Walmart Mailing Address 10200 Sullivan Rd City Baton Rouge State LA Zip Code 70818-4305 Purpose of Disbursement GOTV Volunteer Hospitalityes 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: B4B47CA069DA54F70898 Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 10.47
B. Full Name (Last, First, Middle Initial) Liquid Ventures Mailing Address 12232 Industriplex Blvd Ste 1 City Baton Rouge State LA Zip Code 70809-7105 Purpose of Disbursement Consuting Mgmt 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: BA432CB94586D4048801 Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 5000.00
C. Full Name (Last, First, Middle Initial) Exxonmobil Mailing Address 10391 Airline Hwy City Baton Rouge State LA Zip Code 70816-4004 Purpose of Disbursement Auto Gas Victory Travel 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: B905CDB82170D4DD4A14 Date of Disbursement 11 / 12 / 2010
	Amount of Each Disbursement this Period 32.36

SUBTOTAL of Disbursements This Page (optional) ▶

5042.83

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)

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<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A.	Full Name (Last, First, Middle Initial) Watson Voice And Data	Transaction ID: BAFBCB83F5C9C4563866
	Mailing Address 727 High St	Date of Disbursement MM / DD / YYYY 11 / 01 / 2010
	City Houma State LA Zip Code 70360	Amount of Each Disbursement this Period 142.56
	Purpose of Disbursement Generic GOTV Robo calls	Category/ Type
	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) ▼

B.	Full Name (Last, First, Middle Initial) JW Food Mart	Transaction ID: B03F5FF1FD15F4011AD4
	Mailing Address 561 S Vaughn	Date of Disbursement MM / DD / YYYY 10 / 19 / 2010
	City Brusly State LA Zip Code	Amount of Each Disbursement this Period 37.53
	Purpose of Disbursement Auto Gas Victory Travel	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Exxonmobil	Transaction ID: BEF85704920BB4CD6B70
	Mailing Address 10391 Airline Hwy	Date of Disbursement MM / DD / YYYY 11 / 12 / 2010
	City Baton Rouge State LA Zip Code 70816-4004	Amount of Each Disbursement this Period 37.18
	Purpose of Disbursement Auto Gas Victory Travel	Category/ Type
	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) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	217.27
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)

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<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Terrebonne Truck Stop <hr/> Mailing Address 4067 West Park La <hr/> City Gray State LA Zip Code <hr/> Purpose of Disbursement Auto Gas Victory Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE24CFD466A9347F5A9C Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 39.54
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Direct Mailing Services, Inc <hr/> Mailing Address 12562 N Lakeshore Dr <hr/> City Walker State LA Zip Code 70785 <hr/> Purpose of Disbursement Fundraising Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB0D0A15C76EF4B87B0E Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mele Printing <hr/> Mailing Address 619 N. Tyler Street <hr/> City Covington State LA Zip Code 70433 <hr/> Purpose of Disbursement Victory Business Cards Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB025858145F24DA1B84 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 92.44
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2631.98
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)

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<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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) Internal Revenue Service <hr/> Mailing Address P.O. Box 1210 <hr/> City Charlotte State NC Zip Code 28201-1210 <hr/> Purpose of Disbursement Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9EE7F1FACA1D44B8BE9 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1035.12
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Dollar General Store <hr/> Mailing Address 100 Mission Dr <hr/> City Goodlettsville State TN Zip Code 37072-3768 <hr/> Purpose of Disbursement Victory Ofc Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BE07D54431B5E4CFEB9C Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 19.50
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) GCR & Associates, Inc. <hr/> Mailing Address 2021 Lakeshore Drive Suite 500 <hr/> City New Orleans State LA Zip Code 70122-3529 <hr/> Purpose of Disbursement Generic Early voting robo phone calls Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BB0373F88994C46ACBC6 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 10652.38
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

11707.00

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

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NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

<p>A. Full Name (Last, First, Middle Initial) Domino's Pizza</p> <p>Mailing Address 7865 Jefferson Hwy</p> <p>City Baton Rouge State LA Zip Code 70809</p> <p>Purpose of Disbursement GOTV Volunteer Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B08EF291CF14A45DEB89</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 16.26</p>
<p>B. Full Name (Last, First, Middle Initial) Shell Oil Corporation</p> <p>Mailing Address One Shell Square</p> <p>City Houston State TX Zip Code 77002</p> <p>Purpose of Disbursement Auto Gas Victory Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B979FDE266BC74A2A963</p> <p>Date of Disbursement 11 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 33.58</p>
<p>C. Full Name (Last, First, Middle Initial) Hilton Hotels</p> <p>Mailing Address 7930 Jones Branch Dr Ste 1100</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Republican Summit Venue</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B3D6077DD9E3B480691C</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2765.73</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2815.57

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 42 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

A. 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 State ZIP Code Princeton NJ 08540	

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

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	Transaction ID: D2201137A48C647659C6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 88.00

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	4079.78
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

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

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

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	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	646.63
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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 44 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

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

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

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

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

C. 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

1) SUBTOTALS This Period This Page (optional).....	828.95
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

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

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

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

C. 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	Transaction ID: D0F32C58585484FCE95D	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.16

1) SUBTOTALS This Period This Page (optional).....	▶	134.91
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. 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		Transaction ID: DE500892612A8488981B	
63.78			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	63.78	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	162.50
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Courtyard By Marriot Navyyard			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"/>		Transaction ID: D294298D038FC482DA79	
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. 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="24.00"/>		Transaction ID: D6BF10546BA394C58BBA	
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="24.00"/>	

C. 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 <input type="text" value="145.00"/>		Transaction ID: D28826217F9EF4DB1ADA	
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="145.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="472.27"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 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. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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	

C. 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		Transaction ID: DAE50EAA1917A482FA98	
104.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	104.00	

1) SUBTOTALS This Period This Page (optional).....	▶	371.74
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. 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		Transaction ID: DC816E81D2E9C41B59AC	
1300.82			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1300.82	

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 Baton Rouge	State LA	ZIP Code 70802	

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	1775.75
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

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

Outstanding Balance Beginning This Period		Transaction ID: DB9148B76A2E642AA843	
6.63			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	6.63	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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		Transaction ID: D275D506D213B4F459AF	
38.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	38.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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		Transaction ID: DBD6CE29CCE1247CDBA5	
54.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	54.00	

1) SUBTOTALS This Period This Page (optional).....	▶	98.63
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 <input type="text" value="113.25"/>		Transaction ID: DBC7CFB1D57B74374BC7	
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="113.25"/>	

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 <input type="text" value="105.84"/>		Transaction ID: D04D76C27753B46B98BF	
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="105.84"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="111.87"/>		Transaction ID: D5BBD8CE00EB348E1902	
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="111.87"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="330.96"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 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. 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		Transaction ID: D9A9742BF0CBB47C5B70	
217.07			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	217.07	

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

1) SUBTOTALS This Period This Page (optional).....	▶	1464.98
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

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

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 54.00		Transaction ID: DEE5CA476E5DC46E1BAA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 54.00	

1) SUBTOTALS This Period This Page (optional).....	▶	157.71
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. 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 <input type="text" value="46.95"/>		Transaction ID: D36772175EE414B3DB35	
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="46.95"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 <input type="text" value="39.79"/>		Transaction ID: D59F893BCB86748DC83D	
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="39.79"/>	

C. 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 <input type="text" value="94.08"/>		Transaction ID: DD55A875E37834238880	
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="94.08"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="180.82"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 55 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. 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 McLean State VA ZIP Code 22102	

Outstanding Balance Beginning This Period 73.75	Transaction ID: D8B5D528FB7BE43FEABB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 73.75

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	Transaction ID: DF38238E76A73408195A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 200.00	Transaction ID: D9832197165124FD598E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00

1) SUBTOTALS This Period This Page (optional).....	▶	300.48
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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 56 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

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

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

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	Transaction ID: DF6AF01634F7549559D9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 188.51

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

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

1) SUBTOTALS This Period This Page (optional).....	540.69
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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 57 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

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

Outstanding Balance Beginning This Period 331.94	Transaction ID: D30732137DAFC41FC8AB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 331.94

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

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

1) SUBTOTALS This Period This Page (optional).....	▶	472.33
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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 58 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. 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	Transaction ID: DEBFB2ECFAFE94AF791F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 82.24

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

Outstanding Balance Beginning This Period 153.85	Transaction ID: D8D19D3B52A1C447581F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 153.85

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

Outstanding Balance Beginning This Period 40.62	Transaction ID: D13033851ECE245B5BB5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.62

1) SUBTOTALS This Period This Page (optional).....	▶	276.71
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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 59 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

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

Outstanding Balance Beginning This Period 141.74	Transaction ID: D1DE2A07F255A4BFB8E2	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 141.74

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	Transaction ID: D08FAE847AFE74807855	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 161.52

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 14615.00	Transaction ID: D059CF35BF30349B082E	
Amount Incurred This Period 0.00	Payment This Period 13000.00	Outstanding Balance at Close of This Period 1615.00

1) SUBTOTALS This Period This Page (optional).....	1918.26
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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 60 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Party of Louisiana

A. 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	Transaction ID: D0331390CF1564350925	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7200.00

B. 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 Baton Rouge State LA ZIP Code 70802		

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 228.80	Transaction ID: D5D6C8BF97D0140849B9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 228.80

1) SUBTOTALS This Period This Page (optional).....	▶	7615.47
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

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	Transaction ID: DFFA2A98A133441C79D0	
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	Transaction ID: D151679745D854CD0B88	
2883.42		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2883.42

C. 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	Transaction ID: DA18CC9AE747E4AA5B6E	
430.73		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	430.73

1) SUBTOTALS This Period This Page (optional).....	16928.69
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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 62 / 84
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Republican Party of Louisiana

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fls Connect Llc	Nature of Debt (Purpose): Voter ID phone calls
Mailing Address 7300 Hudson Blvd N Ste 270	
City State ZIP Code Saint Paul MN 55128-7141	

Outstanding Balance Beginning This Period 0.00	Transaction ID: DC41EE077408F4E60924	
Amount Incurred This Period 1162.85	Payment This Period 0.00	Outstanding Balance at Close of This Period 1162.85

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

Outstanding Balance Beginning This Period 0.00	Transaction ID: D9F139F51B1E24D488B7	
Amount Incurred This Period 9025.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9025.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GCR & Associates, Inc.	Nature of Debt (Purpose): Gotv robo calls
Mailing Address 2021 Lakeshore Drive Suite 500	
City State ZIP Code New Orleans LA 70122-3529	

Outstanding Balance Beginning This Period 0.00	Transaction ID: DD69F2D04A9434DF98C6	
Amount Incurred This Period 13895.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 13895.40

1) SUBTOTALS This Period This Page (optional).....	24083.25
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Innovative Advertising, Llc	Nature of Debt (Purpose): GOTV Mail Design
Mailing Address 405 North Columbia Street	
City State ZIP Code Covington LA 70433	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D9193D70B878544EFAC0	
Amount Incurred This Period 4000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MRI Inc.	Nature of Debt (Purpose): phone calls ,H8LA02112'un-
Mailing Address PO Box 24134	
City State ZIP Code New Orleans LA 70184	

Outstanding Balance Beginning This Period 0.00	Transaction ID: D12BC37C17B21489191A	
Amount Incurred This Period 20500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20500.00

1) SUBTOTALS This Period This Page (optional).....	24500.00
2) TOTALS This Period (last page this line number only).....	87341.51
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	87341.51

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	
Mailing Address	
City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Kenny Ho	Purpose of Expenditure GOTV Walkers, 'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 15134 Ferrell Ave		
City	State	ZIP Code
Baton Rouge	LA	70817-1448
Name of Federal Candidate Supported	Office Sought:	House State: LA Senate District: 02 Presidential
Rep. Anh Cao	<input checked="" type="checkbox"/>	
Aggregate General Election Expenditure for this Candidate ▶		61182.90
		Amount: 85.00 Transaction ID: F62789F9D99FE40FCA55

Full Name (Last, First, Middle Initial) of Each Payee GCR & Associates, Inc.	Purpose of Expenditure Get out the vote Robo calls	<input type="text"/> Category/Type
Mailing Address 2021 Lakeshore Drive Suite 500		
City	State	ZIP Code
New Orleans	LA	70122-3529
Name of Federal Candidate Supported	Office Sought:	House State: LA Senate District: _____ Presidential
Sen. David Vitter	<input checked="" type="checkbox"/>	
Aggregate General Election Expenditure for this Candidate ▶		353291.84
		Amount: 30049.70 Transaction ID: FD78A6E2D9BF644AAB3F

Full Name (Last, First, Middle Initial) of Each Payee Brabender Cox	Purpose of Expenditure Direct mail costs	<input type="text"/> Category/Type
Mailing Address 1218 Grandview Ave		
City	State	ZIP Code
Pittsburgh	PA	15211
Name of Federal Candidate Supported	Office Sought:	House State: LA Senate District: _____ Presidential
Sen. David Vitter	<input checked="" type="checkbox"/>	
Aggregate General Election Expenditure for this Candidate ▶		323242.14
		Amount: 3099.00 Transaction ID: FD0C52D3409E94DFF9C0

SUBTOTAL of Expenditures This Page (optional) ▶	33233.70
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Melody Williams	Purpose of Expenditure GOTV Walkers,'H8-LA02112'un-'	Category/Type
Mailing Address 4121 Dryades		
City State ZIP Code New Orleans LA 70115-5409	Date MM / DD / YYYY 11 / 04 / 2010	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02
Aggregate General Election Expenditure for this Candidate ▶	61182.90	Amount 120.00
		Transaction ID: F7FBC5F4B751F492EABE

Full Name (Last, First, Middle Initial) of Each Payee Sue Labry	Purpose of Expenditure GOTV Walkers,'H8-LA02112'un-'	Category/Type
Mailing Address 15348 Waywood Ave		
City State ZIP Code Baton Rouge LA 70816-3060	Date MM / DD / YYYY 11 / 04 / 2010	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02
Aggregate General Election Expenditure for this Candidate ▶	61182.90	Amount 240.00
		Transaction ID: FB439C4882B344AF685C

Full Name (Last, First, Middle Initial) of Each Payee GCR & Associates, Inc.	Purpose of Expenditure Gotv early voter robo calls	Category/Type
Mailing Address 2021 Lakeshore Drive Suite 500		
City State ZIP Code New Orleans LA 70122-3529	Date MM / DD / YYYY 10 / 18 / 2010	
Name of Federal Candidate Supported Rep. Steve J. Scalise	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 01
Aggregate General Election Expenditure for this Candidate ▶	4688.68	Amount 4688.68
		Transaction ID: F81D167EF5D7A4677B06

SUBTOTAL of Expenditures This Page (optional)	5048.68
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	
Mailing Address	
City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Mele Printing	Purpose of Expenditure Direct mail costs, 'H8LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 619 N. Tyler Street		
City	State	ZIP Code
Covington	LA	70433
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: <u>LA</u>
Rep. Anh Cao	<input type="checkbox"/> Senate	District: <u>02</u>
	<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate ▶	41591.66	
		Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
		Amount 17490.16
Transaction ID: F4FCA3947B62A44718DF		

Full Name (Last, First, Middle Initial) of Each Payee Desiree Plyler	Purpose of Expenditure GOTV Walkers, 'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 111 Manchac Way Akers		
City	State	ZIP Code
Akers	LA	70421-3006
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: <u>LA</u>
Rep. Anh Cao	<input type="checkbox"/> Senate	District: <u>02</u>
	<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate ▶	61182.90	
		Date M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
		Amount 135.00
Transaction ID: FFF1D9D945F1C47C2A63		

Full Name (Last, First, Middle Initial) of Each Payee Stephen Pumila	Purpose of Expenditure GOTV Walkers, 'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 17384 Lauren Dr		
City	State	ZIP Code
Prairieville	LA	70769-4636
Name of Federal Candidate Supported	Office Sought: <input checked="" type="checkbox"/> House	State: <u>LA</u>
Rep. Anh Cao	<input type="checkbox"/> Senate	District: <u>02</u>
	<input type="checkbox"/> Presidential	
Aggregate General Election Expenditure for this Candidate ▶	61182.90	
		Date M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
		Amount 240.00
Transaction ID: F181D2EBBC28F4D48B9A		

SUBTOTAL of Expenditures This Page (optional) ▶	17865.16
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	
Mailing Address	
City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Katherine MacMurray		Purpose of Expenditure GOTV Walkers,'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 554 East Ten Mile Road		Date MM / DD / YYYY 11 / 04 / 2010	
City	State	ZIP Code	Amount <input type="text" value="180.00"/>
Pensacola	FL	32514-1526	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02	Transaction ID: F806F0113B67B4FE8A8A
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="61182.90"/>			

Full Name (Last, First, Middle Initial) of Each Payee Chanda Green		Purpose of Expenditure GOTV Walkers,'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 9240 Darcy Ave		Date MM / DD / YYYY 11 / 04 / 2010	
City	State	ZIP Code	Amount <input type="text" value="105.00"/>
Baton Rouge	LA	70814-3003	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02	Transaction ID: F302F00E6C9FF47589E8
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="61182.90"/>			

Full Name (Last, First, Middle Initial) of Each Payee GCR & Associates, Inc.		Purpose of Expenditure Gotv early voter robo calls	<input type="text"/> Category/Type
Mailing Address 2021 Lakeshore Drive Suite 500		Date MM / DD / YYYY 10 / 18 / 2010	
City	State	ZIP Code	Amount <input type="text" value="2686.56"/>
New Orleans	LA	70122-3529	
Name of Federal Candidate Supported Rep. Rodney Alexander	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 05	Transaction ID: F87495D99E0E34753A3E
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="2686.56"/>			

SUBTOTAL of Expenditures This Page (optional) ▶	<input type="text" value="2971.56"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Mr. James St Raymond	Purpose of Expenditure Direct mail costs
Mailing Address 833 Howard Ave #502	Category/Type <input type="text"/>
City State ZIP Code New Orleans LA 70113-1122	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Sen. David Vitter State: LA District:	Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="57738.89"/>	Amount <input type="text" value="1193.53"/> Transaction ID: FD9693F1F451046D6B1A

Full Name (Last, First, Middle Initial) of Each Payee KGLA-1540 Radio	Purpose of Expenditure Radio Ads,H8LA02-112'un-'
Mailing Address 3850 N Causeway Blvd Ste 442	Category/Type <input type="text"/>
City State ZIP Code Metairie LA 70002	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Rep. Anh Cao State: LA District: 02	Date M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="54161.66"/>	Amount <input type="text" value="800.00"/> Transaction ID: F124107A74B9B47BA893

Full Name (Last, First, Middle Initial) of Each Payee Avryon Guice	Purpose of Expenditure GOTV Walkers,H8-LA02112'un-'
Mailing Address 2600 Gentilly Blvd PO Box 735	Category/Type <input type="text"/>
City State ZIP Code New Orleans LA 70122-3044	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Rep. Anh Cao State: LA District: 02	Date M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
Aggregate General Election Expenditure for this Candidate ▶ <input type="text" value="61182.90"/>	Amount <input type="text" value="105.00"/> Transaction ID: FAECE1BC37DAC42CB981

SUBTOTAL of Expenditures This Page (optional) ▶	<input type="text" value="2098.53"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Mele Printing	Purpose of Expenditure Direct mail costs
Mailing Address 619 N. Tyler Street	Category/Type <input type="text"/>
City State ZIP Code Covington LA 70433	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Sen. David Vitter	Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
State: LA District: _____	Amount 34756.32
Aggregate General Election Expenditure for this Candidate ▶ 208620.46	Transaction ID: F061D8792132E459A873

Full Name (Last, First, Middle Initial) of Each Payee Printing Etc	Purpose of Expenditure GOTV Push Cards,- H8LA02112'un-'
Mailing Address 23158 N Woodlawn Dr Suite 100	Category/Type <input type="text"/>
City State ZIP Code Metairie LA 70001	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Rep. Anh Cao	Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
State: LA District: 02	Amount 1301.69
Aggregate General Election Expenditure for this Candidate ▶ 57868.90	Transaction ID: F8868A6951D1C4B0BAC0

Full Name (Last, First, Middle Initial) of Each Payee Sherlock & Associates	Purpose of Expenditure Consultant,'H8LA- 02112'un-'
Mailing Address 419 The Parkway #168	Category/Type <input type="text"/>
City State ZIP Code Greer SC 29650-4522	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential Rep. Anh Cao	Date M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
State: LA District: 02	Amount 5000.00
Aggregate General Election Expenditure for this Candidate ▶ 66182.90	Transaction ID: F2F67518FB0024773B43

SUBTOTAL of Expenditures This Page (optional) ▶	41058.01
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Donna Smith	Purpose of Expenditure GOTV Walkers, 'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 155 Comanche Court		
City State ZIP Code Thibodaux LA 70301-7007	Date M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: LA Rep. Anh Cao Senate District: 02 Presidential	Amount 105.00	
Aggregate General Election Expenditure for this Candidate ▶ 61182.90	Transaction ID: F718ECB8D92E1467CA2C	

Full Name (Last, First, Middle Initial) of Each Payee GCR & Associates, Inc.	Purpose of Expenditure Gotv early voter robo calls	<input type="text"/> Category/Type
Mailing Address 2021 Lakeshore Drive Suite 500		
City State ZIP Code New Orleans LA 70122-3529	Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: LA Jeff Landry Senate District: 03 Presidential	Amount 3461.04	
Aggregate General Election Expenditure for this Candidate ▶ 3461.04	Transaction ID: F678590F622C74946BA8	

Full Name (Last, First, Middle Initial) of Each Payee GCR & Associates, Inc.	Purpose of Expenditure Gotv early voter robo calls	<input type="text"/> Category/Type
Mailing Address 2021 Lakeshore Drive Suite 500		
City State ZIP Code New Orleans LA 70122-3529	Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: LA William Cassidy Senate District: 06 Presidential	Amount 3030.98	
Aggregate General Election Expenditure for this Candidate ▶ 3030.98	Transaction ID: F733076C0854348B2A7E	

SUBTOTAL of Expenditures This Page (optional) ▶	6597.02
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

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 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Liz Trahan	Purpose of Expenditure GOTV Walkers,'H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 150 Terrace St		
City State ZIP Code Destrehan LA 70047-4312	Date MM / DD / YYYY 11 / 04 / 2010	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02
Aggregate General Election Expenditure for this Candidate ▶	240.00	
		Transaction ID: F4F5BA6E0BE44489F8D2

Full Name (Last, First, Middle Initial) of Each Payee Maria Aguire	Purpose of Expenditure GOTV Walker,'H8L-A02112'un-'	<input type="text"/> Category/Type
Mailing Address 60 Avant Garde		
City State ZIP Code Kenner LA 70065-6259	Date MM / DD / YYYY 11 / 04 / 2010	
Name of Federal Candidate Supported Rep. Anh Cao	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: 02
Aggregate General Election Expenditure for this Candidate ▶	90.00	
		Transaction ID: F20D8E4C092FD44488F1

Full Name (Last, First, Middle Initial) of Each Payee Mr. James St Raymond	Purpose of Expenditure Direct mail costs	<input type="text"/> Category/Type
Mailing Address 833 Howard Ave #502		
City State ZIP Code New Orleans LA 70113-1122	Date MM / DD / YYYY 10 / 28 / 2010	
Name of Federal Candidate Supported Sen. David Vitter	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> Presidential	State: LA District: _____
Aggregate General Election Expenditure for this Candidate ▶	4882.68	
		Transaction ID: FFA7437D9DD024423A3B

SUBTOTAL of Expenditures This Page (optional)	5212.68
TOTAL This Period (last page this line number only)	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Advantage Inc.	Purpose of Expenditure Get out the vote phone calls Category/Type
Mailing Address 2300 Clarendon Blvd Suite 1004	
City State ZIP Code Arlington VA 22201	Date MM / DD / YYYY 10 / 28 / 2010
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: _____	Amount 106640.00
Aggregate General Election Expenditure for this Candidate ▶ 323242.14	Transaction ID: F24BA2027D8E14B3FA60

Full Name (Last, First, Middle Initial) of Each Payee Taylor Melancon	Purpose of Expenditure GOTV Walkers, 'H8-LA02112'un-' Category/Type
Mailing Address 4417 Sonfield St Apt A	
City State ZIP Code Metairie LA 70006-2162	Date MM / DD / YYYY 11 / 04 / 2010
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 02	Amount 165.00
Aggregate General Election Expenditure for this Candidate ▶ 61182.90	Transaction ID: F78017E82AF864DD1A20

Full Name (Last, First, Middle Initial) of Each Payee Vietnam International Network Assoc LLC	Purpose of Expenditure Radio Ads ,H8LA0-2112'un-' Category/Type
Mailing Address 2841 Rogers Dr	
City State ZIP Code Fall Church VA 22042	Date MM / DD / YYYY 11 / 01 / 2010
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential State: LA District: 02	Amount 1000.00
Aggregate General Election Expenditure for this Candidate ▶ 54161.66	Transaction ID: FF7ABF93926C2461B9C9

SUBTOTAL of Expenditures This Page (optional) ▶	107805.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) Republican Party of Louisiana	
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee:	
Mailing Address	
City	State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Michael Kinchen		Purpose of Expenditure GOTV Walkers, H8-LA02112'un-'	<input type="text"/> Category/Type
Mailing Address 12042 N Hollywood Est Apt B		Date MM / DD / YYYY 11 / 04 / 2010	
City	State	ZIP Code	Amount <input type="text" value="120.00"/>
Hammond	LA	70401-6046	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Transaction ID: F790ED9F12D924ABC918
Rep. Anh Cao		State: LA District: 02	
Aggregate General Election Expenditure for this Candidate ▶		<input type="text" value="61182.90"/>	

Full Name (Last, First, Middle Initial) of Each Payee Mele Printing		Purpose of Expenditure Get out vote post-cards	<input type="text"/> Category/Type
Mailing Address 619 N. Tyler Street		Date MM / DD / YYYY 10 / 18 / 2010	
City	State	ZIP Code	Amount <input type="text" value="19376.46"/>
Covington	LA	70433	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Transaction ID: FFF458E45A98147EE8CB
Sen. David Vitter		State: LA District: _____	
Aggregate General Election Expenditure for this Candidate ▶		<input type="text" value="57738.89"/>	

Full Name (Last, First, Middle Initial) of Each Payee Brabender Cox		Purpose of Expenditure Direct mail costs	<input type="text"/> Category/Type
Mailing Address 1218 Grandview Ave		Date MM / DD / YYYY 11 / 02 / 2010	
City	State	ZIP Code	Amount <input type="text" value="2250.00"/>
Pittsburgh	PA	15211	
Name of Federal Candidate Supported	Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Transaction ID: FABBD824466AF44F2ABC
Sen. David Vitter		State: LA District: _____	
Aggregate General Election Expenditure for this Candidate ▶		<input type="text" value="355541.84"/>	

SUBTOTAL of Expenditures This Page (optional) ▶	<input type="text" value="21746.46"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED																				
RPL-Federal	<table border="1"> <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>1</td><td>1</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	2	/	2	0	1	0	8664.99
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	2	/	2	0	1	0													

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	8664.99	Transaction ID: H04D71D71F03648BD AFB
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	8664.99
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	8664.99

**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) 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 125725.38		
City Baton Rouge	State LA	Zip Code 70809	Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0		
Purpose of Disbursement: Postage			Transaction ID: H8E5C117A99F345B68B6		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.72		104.28		132.00

B. Full Name (Last, First, Middle Initial) Baton Rouge Marriott			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 Formerly the B.R. Hilton/Davidson Lynnfield Road- Suite 142			Allocated Activity or Event Year-To-Date 127281.09		
City Memphis	State TN	Zip Code 38119	Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0		
Purpose of Disbursement: Meetings Expense			Transaction ID: H7F12DF46315B4B5089D		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.70		1229.01		1555.71

C. Full Name (Last, First, Middle Initial) 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 131281.09		
City Walker	State LA	Zip Code 70785	Date M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0		
Purpose of Disbursement: Strategy Consulting			Transaction ID: H65830B24A16341F8B24		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		3160.00		4000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1194.42		4493.29		5687.71

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)
Iberia Bank

Mailing Address
3700 Essen Ln

City	State	Zip Code
Baton Rouge	LA	70809-2134

Purpose of Disbursement:
Merchant Fees

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
131371.04

Date / /
Transaction ID: HEA3300D78B74474893B

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.89		71.06		89.95

B. Full Name (Last, First, Middle Initial)
Kentwood Water

Mailing Address
11465 Reiger Rd

City	State	Zip Code
Baton Rouge	LA	70809

Purpose of Disbursement:
Water Service

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
132750.95

Date / /
Transaction ID: H5908D10D28834E60A91

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.54		32.14		40.68

C. Full Name (Last, First, Middle Initial)
CIT Technology Fin Serv Inc

Mailing Address
21146 Network Place

City	State	Zip Code
Chicago	IL	60673

Purpose of Disbursement:
Office Copier

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
132750.95

Date / /
Transaction ID: HE10541979E5440C89CA

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.70		416.42		527.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
138.13		519.62		657.75

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) 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 132750.95		
City Maitland	State FL	Zip Code 32794-5800	Date M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0		
Purpose of Disbursement: Office Telephones			Transaction ID: H9E302DDC97BE4BF7B4D		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
126.72		476.73		603.45

B. Full Name (Last, First, Middle Initial) Taxis & Transport Servs			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			Allocated Activity or Event Year-To-Date 132750.95		
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0		
Purpose of Disbursement: Travel			Transaction ID: H100780B48AA549EB99E		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.67		21.33		27.00

C. Full Name (Last, First, Middle Initial) Hilton Hotels			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 7930 Jones Branch Dr Ste 1100			Allocated Activity or Event Year-To-Date 132750.95		
City McLean	State VA	Zip Code 22102	Date M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0		
Purpose of Disbursement: Parking			Transaction ID: HEA3BCFAD870E4414AE3		
Activity or Event Identifier: Admin					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.89		7.11		9.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
134.28		505.17		639.45

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) At&t Mailing Address PO Box 945800 City State Zip Code Maitland FL 32794-5800 Purpose of Disbursement: Cellphone Expense Activity or Event Identifier: Admin	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 Allocated Activity or Event Year-To-Date 132750.95 Date <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2010"/> Transaction ID: HD72FB37C1D5E4B4F883
---	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="36.26"/>		<input type="text" value="136.40"/>		<input type="text" value="172.66"/>

B. Full Name (Last, First, Middle Initial) NewsMax Magazine Mailing Address PO Box 20989 City State Zip Code West Palm Beach FL 33416 Purpose of Disbursement: Subscription Activity or Event Identifier: Admin	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 Allocated Activity or Event Year-To-Date 132805.95 Date <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2010"/> Transaction ID: H8773B1D78FE143B2BFF
---	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="11.55"/>		<input type="text" value="43.45"/>		<input type="text" value="55.00"/>

C. Full Name (Last, First, Middle Initial) Iberia Bank Visa Mailing Address PO Box 30495 City State Zip Code Tampa FL 33630-3495 Purpose of Disbursement: Finance Charges Activity or Event Identifier: Admin	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 Allocated Activity or Event Year-To-Date 132887.91 Date <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2010"/> Transaction ID: H7E949832699D4E18A4D
---	---

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="17.21"/>		<input type="text" value="64.75"/>		<input type="text" value="81.96"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="65.02"/>		<input type="text" value="244.60"/>		<input type="text" value="309.62"/>

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
<input type="text"/>		<input type="text"/>		<input type="text"/>

**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) 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 135887.91	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0	
Walker	LA	70785		
Purpose of Disbursement: Strategy Consulting			Transaction ID: HCE2521515A2E4B4BABA	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

B. Full Name (Last, First, Middle Initial) 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 136078.72	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0	
Baton Rouge	LA	70809-2134		
Purpose of Disbursement: Bank Fees			Transaction ID: H617E7F5D41354282BA5	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.07		150.74		190.81

C. Full Name (Last, First, Middle Initial) Mail Chimp			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 512 Means St Ste 404			Allocated Activity or Event Year-To-Date 136561.72	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0	
Atlanta	GA	30318-5788		
Purpose of Disbursement: Email Service			Transaction ID: HF120BC548935471D842	
Activity or Event Identifier: Admin				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
101.43		381.57		483.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
771.50		2902.31		3673.81

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
2303.35	8664.99	10968.34