

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                                                                                                                             |                                                                                                                                                                                          |                                                  |                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. NAME OF COMMITTEE IN FULL</b><br><div style="text-align: center; font-weight: bold; font-size: 1.2em;">COMMITTEE TO ELECT VANCE MCALLISTER</div>                                                                                                                      |                                                                                                                                                                                          |                                                  |                                                                                                                                                                |
| <b>ADDRESS</b> (number and street)    2460 HIGHWAY 594                                                                                                                                                                                                                      |                                                                                                                                                                                          |                                                  |                                                                                                                                                                |
| <b>CITY, STATE, and ZIP CODE</b><br><div style="display: flex; justify-content: space-between;"> <span>MONROE</span> <span>LA</span> <span>71203</span> </div>                                                                                                              |                                                                                                                                                                                          |                                                  |                                                                                                                                                                |
| <b>2. NAME OF CANDIDATE</b><br>VANCE MICHAEL MCALLISTER                                                                                                                                                                                                                     | <b>3. OFFICE SOUGHT</b> (State and District)<br>House                      LA                      05                                                                                    | <b>4. FEC IDENTIFICATION NUMBER</b><br>C00549352 |                                                                                                                                                                |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____                                                                                              |                                                                                                                                                                                          |                                                  |                                                                                                                                                                |
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br><div style="font-weight: bold; font-size: 1.1em;">PAUL HENRY KIDD Jr.</div><br>P.O. BOX 2474<br><br><div style="display: flex; justify-content: space-between;"> <span>MONROE</span> <span>LA 71207</span> </div>      | Name of Employer<br>SELF EMPLOYED<br><br><div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 0.9em;">Transaction ID : F6.4582</div> Occupation<br>ATTORNEY  | Date (month, day, year)<br><br>11/08/2013        | Amount<br><br><div style="text-align: right;">1000.00</div>                                                                                                    |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br><div style="font-weight: bold; font-size: 1.1em;">GREGORY SAMPOGNARO</div><br>2503 BROADMOOR BLVD<br><br><div style="display: flex; justify-content: space-between;"> <span>MONROE</span> <span>LA 71201</span> </div> | Name of Employer<br>SELF EMPLOYED<br><br><div style="border: 1px solid black; padding: 2px; font-weight: bold; font-size: 0.9em;">Transaction ID : F6.4584</div> Occupation<br>PHYSICIAN | Date (month, day, year)<br><br>11/05/2013        | Amount<br><br><div style="text-align: right;">1000.00</div>                                                                                                    |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                                                                                                                           | Name of Employer<br><br><br>Occupation                                                                                                                                                   | Date (month, day, year)                          | Amount                                                                                                                                                         |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                                                                                                                           | Name of Employer<br><br><br>Occupation                                                                                                                                                   | Date (month, day, year)                          | Amount                                                                                                                                                         |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                                                                                                                           | Name of Employer<br><br><br>Occupation                                                                                                                                                   | Date (month, day, year)                          | Amount                                                                                                                                                         |
| <b>SIGNATURE (optional)</b><br><i>Marty William French</i><br><div style="text-align: right; font-weight: bold; font-size: 0.9em;">[Electronically Filed]</div>                                                                                                             |                                                                                                                                                                                          | <b>DATE</b><br>11/08/2013                        | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

## FEC FORM 6

(Revised 07/2011)