FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	Authorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in fu	TYPE OR PRIN		ample: If typinger the lines.	g, type	12FE4M5	
Committee to Ele	ect Gary King					
l						
	j 5537 Canal Bl	vd				
ADDRESS (number and s	street)					
Check if differ						
than previously reported. (ACC					LA L	70124
2. FEC IDENTIFICA	TION NUMBER ▼	CITY ▲		;	STATE A	ZIP CODE
C C00528125		3. IS THIS	NEW		✓ AMEND	STATE ▼ DISTRICT
G 000320123		REPORT	(N)	OR	× AMEND (A)	LA 01
4. TYPE OF REPO	OPT (Change Ope)					
(a) Quarterly Repo	,	(b) 12-Day PRE	-Election Repo	ort for the:		
			Primary (12P)		General (1	2G) Runoff (12R)
April 15 Q	uarterly Report (Q1)	П	Convention (12C)	Special (12	2S)
July 15 Q	uarterly Report (Q2)				ороски (п	
X October 1	5 Quarterly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January 3	1 Year-End Report (YE)	(c) 30-Day POS	T -Election Rep	oort for the:		
_		П	General (30G		Runoff (30	R) Special (30S)
П					Tunon (oo	Ti) Opediai (dde)
Terminatio	n Report (TER)	Election on	M M /	D D /	Y Y Y	in the State of
		Y Y Y Y		м	/ D D /	YYYY
5. Covering Period	07 01	2012	through	09	30	2012
I certify that I have example 1	mined this Report and to	the best of my kn	owledge and l	belief it is tru	ue, correct and	l complete.
Type or Print Name of	Treasurer Christopher N	/l. Gagnon				
Signature of Treasurer	Christopher M. Gagnon		[Electronically I	Filed] D	eate 08	/ DDD / Y Y Y Y Y Y 2012
NOTE: Submission of fal	se, erroneous, or incomple	ete information mav	subject the per	son signing t	his Report to th	ne penalties of 2 U.S.C. §437g.
Office				3 3	<u>.</u>	
Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 21

1 20 1 3111 3 (Heviesa 52, 200

Write or Type Committee Name
Committee to Elect Gary King

			COLUMN A This Period	COLUMN B Election Cycle-to-Date			
6.	Net	Contributions (other than loans)					
	(a)	Total Contributions (other than loans) (from Line 11(e))	3325.00	3325.00			
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00			
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3325.00	3325.00			
7.	Net	Operating Expenditures					
	(a)	Total Operating Expenditures (from Line 17)	3778.41	3778.41			
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00			
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3778.41	3778.41			
8.		sh on Hand at Close of porting Period (from Line 27)	1540.91				
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00				
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	1994.32				

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Committee to Elect Gary King

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11. (CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	2750.00	2750.00		
	(ii) Unitemized	575.00	575.00		
	(iii) TOTAL of contributions from individuals	3325.00	3325.00		
	b) Political Party Committees	0.00	0.00		
((such as PACs)	0.00	0.00		
	d) The Candidate e) TOTAL CONTRIBUTIONS	0.00	0.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3325.00	3325.00		
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
	OANS: a) Made or Guaranteed by the				
(Candidate	325.00	325.00		
	b) All Other Loans	1669.32	1669.32		
,	(add Lines 13(a) and (b))	1994.32	1994.32		
E	OFFSETS TO OPERATING EXPENDITURES	0.00	0.00		
(Refunds, Rebates, etc.)	0.00	0.00		
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00		
-	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	5319.32	5319.32		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

	II. D	DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERAT	TING EXPENDITURES	3778.41	3778.41
18.		ERS TO OTHER RIZED COMMITTEES	0.00	0.00
19.	LOAN R	EPAYMENTS:		
	` '	Loans Made or Guaranteed the Candidate	0.00	0.00
	(b) Of A	All Other Loans	0.00	0.00
	. ,	TAL LOAN REPAYMENTS d Lines 19(a) and (b))	0.00	0.00
20.	REFUND	DS OF CONTRIBUTIONS TO:	, , , , , , , , , , , , , , , , , , , ,	, ,
		viduals/Persons Other	0.00	0.00
		tical Party Committees	0.00	0.00
	(c) Oth	er Political Committees	0.00	0.00
		ch as PACs)		, , , ,
	, ,	TAL CONTRIBUTION REFUNDS d Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER	DISBURSEMENTS	0.00	0.00
22.		DISBURSEMENTS es 17, 18, 19(c), 20(d), and 21)	3778.41	3778.41
		III. CASH SUMM	ARY	
23.	CASH O	N HAND AT BEGINNING OF REPORTING	PERIOD	0.00
24	TOTAL F	RECEIPTS THIS PERIOD (from Line 16, page 15)	age 3)	5319.32
25.	SUBTOT	TAL (add Line 23 and Line 24)		5319.32
26.	TOTAL [DISBURSEMENTS THIS PERIOD (from Lin	ne 22)	3778.41
		ON HAND AT CLOSE OF REPORTING PE		

FOR LINE NUMBER: **PAGE** 5 OF (check only one) 11a 11b 11d 11c 12 13a 13b

21 Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Committee to Elect Gary King Full Name (Last, First, Middle Initial) Kevin R. Gagnon Date of Receipt Mailing Address 3901 Edenborn Ave. 80 2012 01 City State Zip Code Transaction ID: SA11AI.4156 LA 70002 Metairie FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation In-kind -Self **Business Services** Receipt For: 2012 Election Cycle-to-Date X General Primary 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Walt Paulson Date of Receipt Mailing Address 4503 Perrier St. 12 2012 City State Zip Code Transaction ID: SA11AI.4124 New Orleans LA 70115 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Self Receipt For: 2012 Election Cycle-to-Date Primary Meneral Control 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... 2750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE 6 OF 21						
Use separate schedule(s) for each category of the	(check only one)							
	11a 11b	11c 11d						
Detailed Summary Page	12 X 13a	13b 14 15						
y not be sold or used by any p		<u> </u>						

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Committee to Elect Gary King Full Name (Last, First, Middle Initial) Gary King Date of Receipt Mailing Address 5537 Canal Blvd 2012 18 City State Zip Code Transaction ID: SA13A.4154 LA 70124 **New Orleans** FEC ID number of contributing Amount of Each Receipt this Period H4NM02056 federal political committee. 75.00 Name of Employer Occupation Secretary of State Self Music Teacher Receipt For: 2012 Election Cycle-to-Date Primary X General 75.00 Other (specify) Full Name (Last, First, Middle Initial) Gary King Date of Receipt Mailing Address 5537 Canal Blvd 25 2012 City State Zip Code Transaction ID: SA13A.4117 New Orleans LA 70124 FEC ID number of contributing C H4NM02056 Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation Music Teacher Self Receipt For: 2012 Election Cycle-to-Date ✓ General Primary 175.00 Other (specify) Full Name (Last, First, Middle Initial) Gary King Date of Receipt Mailing Address 5537 Canal Blvd 01 2012 City State Zip Code Transaction ID: SA13A.4118 LA **New Orleans** 70124 FEC ID number of contributing C H4NM02056 Amount of Each Receipt this Period federal political committee. 150.00 Name of Employer Occupation Self Music Teacher Receipt For: 2012 Election Cycle-to-Date X General Primary 325.00 Other (specify) 325.00 SUBTOTAL of Receipts This Page (optional)..... 325.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 7 OF 21 (check only one)
TEVEN TO		Detailed Summary Page	12 13a X 13b 14 15
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Committee to Elect Gary Kir	ng		
Full Name (Last, First, Middle Initial) Cut Loose Hair Studio			Date of Receipt
Mailing Address 5537 Canal Blvd.			08 27 2012
City	State LA	Zip Code 70124	Transaction ID : SA13B.4120
New Orleans FEC ID number of contributing	C	70124	Amount of Each Receipt this Period
federal political committee.	U .		500.00
Name of Employer	Occupation		, , , , , , , , ,
Receipt For: 2012 Primary General	Election Cy	vcle-to-Date	
Other (specify)		500.00	
Full Name (Last, First, Middle Initial) Kathy Rougelot			Date of Receipt
Mailing Address 5537 Canal Blvd			08 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code 70124	Transaction ID : SA13B.4146
New Orleans	LA	70124	
FEC ID number of contributing federal political committee.	C	70124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation		209.89
FEC ID number of contributing federal political committee.	Occupation Self-employ	ed	
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon	Occupation Self-employ		209.89
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary Other (specify) Full Name (Last, First, Middle Initial)	Occupation Self-employ	ed vcle-to-Date	209.89
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary Other (specify) General	Occupation Self-employ	ed vcle-to-Date	Campaign Materials Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Kathy Rougelot	Occupation Self-employ	ed vcle-to-Date 209.89	Campaign Materials Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd City	Occupation Self-employ Election Cy	ed vole-to-Date	Campaign Materials Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd City New Orleans FEC ID number of contributing federal political committee. Name of Employer	C Occupation Self-employ Election Cy State LA C Occupation	ed vole-to-Date 209.89 Zip Code 70124	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd City New Orleans FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon	C Occupation Self-employ State LA C Occupation Self-employ	ed vole-to-Date 209.89 Zip Code 70124	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Cut Loose Hair Salon Receipt For: 2012 Primary General Other (specify) Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd City New Orleans FEC ID number of contributing federal political committee. Name of Employer	C Occupation Self-employ State LA C Occupation Self-employ	ed vole-to-Date 209.89 Zip Code 70124	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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

SCHEDULE A (FEC Form **ITEMIZED RECEIPTS**

Name of Employer

FEC ID number of contributing federal political committee.

lmage# 12961002859			
SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 21 (check only one) 11a 11b 11c 11d 11d 12 13a X 13b 14 15
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Committee to Elect Gary King	g		
Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd			Date of Receipt 08 15 2012
City New Orleans	State LA	Zip Code 70124	Transaction ID : SA13B.4148
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer Cut Loose Hair Salon	Occupation Self-employ		Campaign Materials
Receipt For: 2012 Primary General Other (specify)	Election Cy	ycle-to-Date 607.75]
Full Name (Last, First, Middle Initial) Kathy Rougelot			Date of Receipt
Mailing Address 5537 Canal Blvd City	State	Zip Code	08 16 2012 Transaction ID : SA13B.4149
New Orleans	LA	70124	
FEC ID number of contributing	C		Amount of Each Receipt this Period

Cut Loose Hair Salon	Self-employed	Campaign Materials
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 817.64	
Full Name (Last, First, Middle Initial) Kathy Rougelot Mailing Address 5537 Canal Blvd		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA13B.4150
New Orleans	LA 70124	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	101.68
Cut Loose Hair Salon	Self-employed	Campaign Materials
Receipt For: 2012 Primary X General Other (specify)	Election Cycle-to-Date 919.32	
SUBTOTAL of Receipts This Page (optional)		522.98

Occupation

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

209.89

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

Image# 12961002860			
SCHEDULE A (I	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 21 (check only one) 11a 11b 11c 11d 11d 12 13a X 13b 14 15
	•	, , ,	person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTE COMMITTE	` ,		
A. Full Name (Last, First, Kathy Rougelot Mailing Address 5537			Date of Receipt 09 28 2012
City New Orleans	State LA	Zip Code 70124	Transaction ID : SA13B.4151
FFC ID number of co	atributing		

Committee to Elect Gary King		
Full Name (Last, First, Middle Initial) Kathy Rougelot		Date of Receipt
Mailing Address 5537 Canal Blvd		09 28 2012
City	State Zip Code	Transaction ID : SA13B.4151
New Orleans	LA 70124	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	Campaign Materials
Cut Loose Hair Salon Receipt For: 2012	Self-employed	Campaign Materials
Primary Seneral	Election Cycle-to-Date	
Other (specify)	1169.32	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	
FEC ID number of contributing	0	Amount of Fook Reseipt this Revised
federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	, ,
Receipt For:	Election Cycle-to-Date	
Primary General		
Other (specify)	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	
FEC ID number of contributing	C	Amount of Each Possint this Poving
federal political committee.	0	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For:	Election Cycle-to-Date	
Primary General		
Other (specify)		
CURTOTAL of Descripts This Boss (set 1)		250.00
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number	only)	1669.32

SCHEDULE B (FEC Form 3)	Use separate sch		FOR LINE NUMBER: PAGE 10 OF 21 (check only one)				
TEMIZED DISBURSEMENTS	for each category Detailed Summar		X 17 18 19a 1 20a 20b 20c 2				
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) Committee to Elect Gary King							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. Action Press, Inc			Date of Disbursement				
Mailing Address 3720 Hessmer Ave.			09 17 2012				
City Stat			Amount of Each Disbursement this Period				
Metairie LA Purpose of Disbursement	70002	_	135.94				
Advertising		004	Transaction ID : SB17.4137				
Candidate Name Committee to Elect Gary King		Category/ Type					
Office Sought: House Disbursemen	t For: 2012	1,750					
	mary X General ner (specify)						
State: LA District: 01	тег (ореону)						
Full Name (Last, First, Middle Initial) Ed Smith Stencils			Balance Birthamanan				
3. La Silita Stellolis			Date of Disbursement				
Mailing Address PO Box 791837			09 26 7 2012				
City Stat	•		Amount of Each Disbursement this Period				
New Orleans LA Purpose of Disbursement	70179		228.66				
Printing		006	Transaction ID : SB17.4141				
Candidate Name Committee to Elect Gary King		Category/ Type					
Office Sought: House Disbursemen							
	mary X General ner (specify)						
State: LA District: 01							
Full Name (Last, First, Middle Initial) C. Gagnon & Associates Consulting			Date of Disbursement				
Gagnon & Associates Consulting			M M / D D / Y Y Y				
Mailing Address 1425 N. Broad Street Suite 201			08 27 2012				
City State	Zip Code		Amount of Each Disbursement this Period				
New Orleans LA Purpose of Disbursement	70119		500.00				
Professional Fee		001	Transaction ID : SB17.4132				
Candidate Name Committee to Elect Gary King		Category/ Type					
Office Sought: House Disbursemen		.,,,,	_				
	mary X General General						
State: LA District: 01	.c. (opcony)						
			864.60				
SUBTOTAL of Disbursements This Page (optional)							

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:			PAGE	11	OF	21
Use separate schedule(s) for each category of the Detailed Summary Page	(check only c	_					
	X 17	7	18		19a		19b
	20	Da 📗	20b		20c		21
ay not be cold or used by any	noroon for the	nurnaaa	of oo	liciting	cont	ributia	nno

	Detailed	Summary F	aye			20a		20b	20c	21
	ny information copied from such Reports and Statements may not be for commercial purposes, other than using the name and address of					he purp	ose o	of solicit	ting contrib	utions
\rangle	NAME OF COMMITTEE (In Full) Committee to Elect Gary King									
۸.	Full Name (Last, First, Middle Initial) Kevin R. Gagnon				ate	of Disbu	ursem		/ # Y # Y #	V
	Mailing Address 3901 Edenborn Ave.				08		01		2012	¥
	CityStateZip CoMetairieLA70002			Aı	mou	ınt of Ea	ach D	isburse	ment this F	-
	Purpose of Disbursement In-kind -			Trai	nsa	ction ID	: SB	17.4157	2500.	00
	Candidate Name		Category/ Type							
	Office Sought: House Disbursement For: 2012 Senate Primary Grade President Other (specify) State: District:	General								
3.	Full Name (Last, First, Middle Initial)				ate	of Disbu	ursem		/ Y Y	Y
	Mailing Address			L						
	City State Zip Co	ode 		Aı	mou	ınt of Ea	ach D	isburse	ment this F	Period
	Purpose of Disbursement] [-		_			
	Candidate Name		Category/ Type							
	Office Sought: House Disbursement For: Senate Primary God Other (specify) State: District:	General								
_	Full Name (Last, First, Middle Initial)			D	ate	of Disbu	ırsem	nent		
С.	Mailing Address				-		D D		Y Y Y	Υ
	City State Zip Code			Aı	mou	ınt of Ea	ach D	isburse	ment this F	Period
	Purpose of Disbursement			7 L	_			,		
	Candidate Name		Category/ Type	1						
	Office Sought: House Disbursement For: Primary Good	General								
s	SUBTOTAL of Disbursements This Page (optional)				Ξ		Ĭ	. ,	2500.	.00
Т	OTAL This Period (last page this line number only)				Ξ				3364.	60

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE 12

X 13a

DANS			Detailed Sum	mary Page	(check only o	13k
AME OF COMMITTEE (In Full) Committee to Elect Gary K	ing		•	Transaction	n ID : SC/10.4154	
LOAN SOURCE Full Name (Las	t, First, Middle Initial)		[PERSONAL F	UNDS]	lection: 2012	
Gary King					Primary General	
Mailing Address 5537 Canal Blvd					Other (specify)	▼
City	State	ZIP Cod	е			
New Orleans	LA	70124				
Original Amount of Loan	Cumulativ	ve Payment To [Date	Balance	e Outstanding at 0	Close of This Per
	75.00	, ,	0.00		2	75.00
TERMS Date Incurred		Date Due	Inte	erest Rate		Secured:
M07 ^M / D18 ^D / Y 2012	M M /	D D / Y 07	7/18/14 Y	0.00	% (apr)	Yes
List All Endorsers or Guarantor	s (if any) to Loan So	urce				103 1
1. Full Name (Last, First, Middle	Initial)		Name of Employ	/er		
Mailing Address			Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle	Initial)		Name of Employ	/er		
Mailing Address			Occupation			
			Amount			
City	State ZIP Cod	de	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle	Initial)		Name of Employ	/er		
Mailing Address			Occupation			
011	710.0		Amount Guaranteed			
City	State ZIP Cod	10	Outstanding:		7	
4. Full Name (Last, First, Middle	Initial)		Name of Employ	/er		
Mailing Address			Occupation			
City	State ZIP Cod	de	Amount Guaranteed Outstanding:	7	7	
SUBTOTALS This Period This Page	(optional))		7	75.00
OTALS This Period (last page in the				·	4.4.	line of O
Carry outstanding balance only to l	בווא⊏ ט, Scneaule D, fo	or this line. It n	o scneaule D, d	arry torward	u to appropriate	line of Summary

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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×	13a
	13h

21

Detailed Summary Page Transaction ID: SC/10.4117 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King General Mailing Address Other (specify) \blacktriangledown 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 07^M Ž012 07/25/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

14

×	13a
	13b

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Detailed Summary Page Transaction ID: SC/10.4118 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Gary King General Mailing Address Other (specify) \blacktriangledown 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150.00 0.00 150.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M08^M Ž012 08/01/14 0.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 150.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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OANS			for each category of Detailed Summary Pa		only one)	13a X 13b
AME OF COMMITTEE (In Full)			Transa	action ID : SC/10.	.4120	X 105
Committee to Elect Gary Kin	g					
LOAN SOURCE Full Name (Last, Cut Loose Hair Studio	First, Middle Initial)			Election: 20)12	
Mailing Address 5537 Canal Blvd.				General Other (sp	ecify) 🔻	
City	State	ZIP Code				
New Orleans	LA	70124	•			
	Cumulativ	a Daymont To D	ata Pa	Janas Outstandin	a at Class of	This Daried
Original Amount of Loan		e Payment To D	0.00	alance Outstandin		600.00
TERMS		, ,		7	,	
Date Incurred Mo8 / D27 / Y 2012	Y M M / I	Date Due	Interest Ra 27/14 O.0		Secure	X
List All Endorsers or Guarantors	if any) to Loan Sou	ırce			Ye	es No
1. Full Name (Last, First, Middle Ir	nitial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Code	e .	Amount Guaranteed Dutstanding:	7 7		
2. Full Name (Last, First, Middle Ini	tial)	1	Name of Employer			
Mailing Address			Occupation			
City	State ZIP Code	Э (Amount Guaranteed Dutstanding:	7 7		
3. Full Name (Last, First, Middle Ini	tial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Code	9	Amount Guaranteed Dutstanding:	7 7		
4. Full Name (Last, First, Middle Ini	tial)		Name of Employer			
Mailing Address		(Occupation			
City	State ZIP Code	Э	Amount Guaranteed Outstanding:	7 7		
SUBTOTALS This Period This Page (c	ptional)		.		5	500.00
TOTALS This Period (last page in this	line only)				,	
Carry outstanding balance only to LIN	IE 3. Schedule D. fo	r this line. If no	Schedule D. carry fo	rward to approp	riate line of S	Summary.

Use separate schedule(s)

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DANS			for each category of Detailed Summary Pa		check only one)	×	13a 13b
AME OF COMMITTEE (In Full)			Transa	ection ID :	SC/10.4146		(100
Committee to Elect Ga	ry King						
LOAN SOURCE Full Name	(Last, First, Middle	Initial)		Electio	n: 2012		
Kathy Rougelot				Pri	imary eneral		
Mailing Address 5537 Canal Blvd				Ot	her (specify) \blacktriangledown		
City	Sta	ate ZIP Cod	le				
New Orleans	l	_A 70124					
Original Amount of Loan	C	Cumulative Payment To I	Date Ba	lance Out	standing at Clos	e of This	s Period
	209.89		0.00		,	209.8	39
TERMS Date Incurred	d	Date Due	Interest Ra	te	S	ecured:	
M 08 M / D 02 D / Y	ž01ž ^Y		√02/14 ° 0.0	00	% (apr)		X
List All Endorsers or Guar	antors (if any) to L	oan Source				Yes	No
1. Full Name (Last, First, N	/liddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount				1
City	State	ZIP Code	Guaranteed Outstanding:	7	7	W	1
2. Full Name (Last, First, M	iddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount Guaranteed				1
City	State	ZIP Code	Outstanding:	7	7		ı
3. Full Name (Last, First, M	iddle Initial)		Name of Employer				
Mailing Address			Occupation				
011			Amount Guaranteed				1
City	State 2	ZIP Code	Outstanding:	7	7	-	1
4. Full Name (Last, First, M	iddle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount				1
City	State 2	ZIP Code	Guaranteed Outstanding:	7	7	/B	J
SUBTOTALS This Period This						209.8	39
FOTALS This Period (last page	e in this line only)		······				
Carry outstanding balance on	ly to LINE 3, Schedi	ule D, for this line. If n	o Schedule D, carry for	ward to	appropriate line	of Sum	ımary.

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

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Detailed Summary Page Transaction ID: SC/10.4147 NAME OF COMMITTEE (In Full) Committee to Elect Gary King LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Kathy Rougelot ★ General Mailing Address Other (specify) \blacktriangledown 5537 Canal Blvd City State ZIP Code LA 70124 **New Orleans** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 186.45 0.00 186.45 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M08^M 09 Ž012 0.00 08/09/14 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 186.45 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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DANS		Detailed Summary Page	(Crieck only one) X 13b
AME OF COMMITTEE (In Full) Committee to Elect Gary King		Transaction	n ID : SC/10.4148
LOAN SOURCE Full Name (Last, Firs	t, Middle Initial)	E	lection: 2012
Kathy Rougelot			Primary
Mailing Address 5537 Canal Blvd			✓ General Other (specify) ▼
City	State ZIP C	Gode -	
New Orleans	LA 70124	4	
Original Amount of Loan	Cumulative Payment T	o Date Balance	Outstanding at Close of This Period
211.41		0.00	211.41
TERMS Date Incurred	Date Due	e Interest Rate	Secured:
M 08 M / 15 / Y Ž01Ž Y	M M / D D / Y	0.00 08/15/14 V	% (apr) Yes No
List All Endorsers or Guarantors (if a	any) to Loan Source		ics inc
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial))	Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial))	Name of Employer	
Mailing Address		Occupation	
		Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	9 1 1
4. Full Name (Last, First, Middle Initial))	Name of Employer	
Mailing Address		Occupation	
00	715.0	Amount	
City Sta	ate ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (option	onal)	•	211.41
TOTALS This Period (last page in this lin	e only)	······	9 9
Carry outstanding balance only to LINE	3, Schedule D, for this line. I	f no Schedule D, carry forward	d to appropriate line of Summary.

Use separate schedule(s) for each category of the

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OANS		Detailed Summary Page				
AME OF COMMITTEE (In Full)		Transacti	ion ID : SC/10.4149			
Committee to Elect Gary King						
LOAN SOURCE Full Name (Last, First, Middle	Initial)		Election: 2012			
Kathy Rougelot			Primary			
Mailing Address			General Other (specify) ▼			
5537 Canal Blvd			Other (specify)			
City Sta	te ZIP Code	;				
New Orleans L.	A 70124					
Original Amount of Loan Cu	umulative Payment To D	ate Balan	ce Outstanding at Close of This Period			
209.89		0.00	209.89			
TERMS Date Incurred	Date Due	Interest Rate	Secured:			
M08 ^M / D16 ^D / Y Ž01Ž Y		/16/14 Y 0.00	% (apr)			
List All Endorsers or Guarantors (if any) to Lo	an Source		Yes No			
Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	(Occupation				
		Amount				
City State Z	IP Code	Guaranteed Outstanding:	9			
2. Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	(Occupation				
		Amount				
City State Z	IF COUE	Guaranteed Outstanding:	9 9			
3. Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	(Occupation				
		Amount				
City State Z	11 0000	Guaranteed Outstanding:	9 9			
4. Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address	(Occupation				
		Amount				
City State Z		Guaranteed Outstanding:	7 7			
UBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this line only)						
Carry outstanding balance only to LINE 3, Schedu	le D. for this line. If no	Schedule D. carry forwa	ard to appropriate line of Summary			
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OANS		Detailed Summary Pa	
AME OF COMMITTEE (In Full)		Transa	ction ID : SC/10.4150
Committee to Elect Gary Kin	g		
LOAN SOURCE Full Name (Last, I			Election: 2012
Kathy Rougelot	,		Primary General
Mailing Address 5537 Canal Blvd			Other (specify)
City	State	ZIP Code	
New Orleans	LA	70124	
Original Amount of Loan	Cumulative Pay	ment To Date Bal	ance Outstanding at Close of This Period
101	.68	0.00	101.68
TERMS Date Incurred		ate Due Interest Rat	
M08 ^M / D24 ^D / Y 2012	Y M M / D D	/ Y 08/24/14 Y 0.0	0 % (apr) Yes No
List All Endorsers or Guarantors (
1. Full Name (Last, First, Middle Ir	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1
SUBTOTALS This Period This Page (c	ptional)		101.68
TOTALS This Period (last page in this	line only)		, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance only to LIN	IE 3. Schedule D. for this	line. If no Schedule D. carry for	ward to appropriate line of Summary.

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DANS		Detailed Summary Pag			
AME OF COMMITTEE (In Full)		Transac	etion ID : SC/10.4151		
Committee to Elect Gary Kir	ng				
LOAN SOURCE Full Name (Last,	First, Middle Initial)		Election: 2012		
Kathy Rougelot			Primary		
Mailing Address			General Other (specify) ▼		
5537 Canal Blvd					
City	State ZIP (Code			
New Orleans	LA 7012	24			
Original Amount of Loan	Cumulative Payment	To Date Bala	ance Outstanding at Close of This Period		
250	0.00	0.00	250.00		
TERMS	3	9	9 9		
Date Incurred	Date Du	ie Interest Rate	e Secured:		
M ₀₉ M / D ₂₈ D / Y 2012	Y M M / D D /	^Y 09/28/14 ^Y 0.00	% (apr)		
List All Endorsers or Guarantors	(if any) to Loan Source		Yes No		
1. Full Name (Last, First, Middle I	nitial)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	State ZIP Code	Guaranteed Outstanding:	9 9		
2. Full Name (Last, First, Middle In	itial)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	State ZIP Code	Guaranteed Outstanding:	9 9		
3. Full Name (Last, First, Middle In	itial)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	State ZIP Code	Guaranteed Outstanding:	9 9		
4. Full Name (Last, First, Middle In	itial)	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	State ZIP Code	Guaranteed Outstanding:	9 9		
UBTOTALS This Period This Page (optional)					
OTALS This Period (last page in this line only)					
carry outstanding balance only to LINE 3. Schedule D. for this line. If no Schedule D. carry forward to appropriate line of Summary.					