

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Lenar

ADDRESS (number and street)

P.O. Box 66152

Check if different than previously reported. (ACC)

Washington

DC

20035

2. FEC IDENTIFICATION NUMBER ▼

C C00564138

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

LA

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

08

22

2014

in the State of

LA

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2014

through

08

02

2014

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 David Satterfield

Signature of Treasurer David Satterfield

[Electronically Filed]

Date

08

10

2014

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 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Friends of Lenar**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	22298.22	145470.98
(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)).....	22298.22	145470.98
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	61830.10	80050.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	1500.00	1500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60330.10	78550.52
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	66920.46	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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)

Write or Type Committee Name

**Friends of Lenar**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 08 / 02 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20000.00	139100.00
(ii) Unitemized .....	2298.22	4870.98
(iii) TOTAL of contributions from individuals .....	22298.22	143970.98
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	22298.22	145470.98
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	1500.00	1500.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	23798.22	146970.98

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	61830.10	80050.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	61830.10	80050.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	104952.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23798.22
25. SUBTOTAL (add Line 23 and Line 24).....	128750.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61830.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	66920.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**Jeremiah Supple**

Mailing Address 200 Acacia Dr

City Lafayette State LA Zip Code 70508-4004

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

Name of Employer Patriot Buildings Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : AA1E600F99DC142918A7**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ronald Bracken**

Mailing Address 1215 Bush Street

City Maricopa State CA Zip Code 93252-9702

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

Name of Employer Self employed Occupation Oil worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 01 / 2014

**Transaction ID : AD0C6C537554245D79F3**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Clark**

Mailing Address 6314 W Park Ave

City Houma State LA Zip Code 70364-2234

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

Name of Employer Bruce Clark Insurance Agency, Ltd Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 27 / 2014

**Transaction ID : A0015BCCC3ACB4153B9E**

Amount of Each Receipt this Period  
 2400.00

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

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

5400.00

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

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

FOR LINE NUMBER: PAGE 6 OF 19  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**Michael S Haydel MD**

Mailing Address **PO BOX 1227**

City **Houma** State **LA** Zip Code **70361-1227**

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

Name of Employer **Haydel Spine & Pain Specialty Center** Occupation **Doctor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A6438B51D29AE4909B7E**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**William H Kinnard**

Mailing Address **406 JUNE DR**

City **Houma** State **LA** Zip Code **70360-7422**

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

Name of Employer **Houma Orthopaedic** Occupation **Surgeon**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A27B4A243D5B04CEF98C**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ronald J Eschete**

Mailing Address **205 BELLINGRATH DR**

City **Houma** State **LA** Zip Code **70360-7998**

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

Name of Employer **THI, Inc** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 29 / 2014**

**Transaction ID : A8ACAF3652FAE44059A5**

Amount of Each Receipt this Period  
**300.00**

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

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

**1300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**L. Lane Land Grigsby**

Mailing Address **PO BOX 104**

City **Baton Rouge** State **LA** Zip Code **70821-0104**

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

Name of Employer **Cajun Contractors** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : ACD7CCC444EA44B2D931**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Jimmy Lirette**

Mailing Address **200 South Central Blvd**

City **Chauvin** State **LA** Zip Code **70344-4306**

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

Name of Employer **Piranha rentals** Occupation **Member**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : AF484DAF295744AA2943**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Henry Cournoyer**

Mailing Address **1380 West Tunnel Blvd**

City **Houma** State **LA** Zip Code **70360-2731**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : AFA34D61D531B4518BA5**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**Louis Gurvich**

Mailing Address 12532 Eleonore St

City State Zip Code  
New Orleans LA 70115

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

Name of Employer Occupation  
New Orleans Private Patrol Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A05A25CCBE09D483E8BA**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**William Stegall**

Mailing Address 19350 N Muirfield Cir

City State Zip Code  
Baton Rouge LA 70810-5983

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

Name of Employer Occupation  
Self employed Entrepreneur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 02 / 2014

**Transaction ID : A402CD980E1754BB98EF**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Alexander**

Mailing Address 1020 Schol St

City State Zip Code  
Houma LA 70360-4630

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

Name of Employer Occupation  
Self employed Doctor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A5E2B67ADAA9940B3A57**

Amount of Each Receipt this Period  
1000.00

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

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

4600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**Kirby Fabre**

Mailing Address 335 Sugar Plum St

City Houma	State LA	Zip Code 70364-4470
---------------	-------------	------------------------

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

Name of Employer Shell Offshore	Occupation Safety Administrator
------------------------------------	------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A9436ED4B63E44D8FA3E**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anthony Demonte**

Mailing Address 1931 St. Clair Dr.

City Pekin	State IL	Zip Code 61554-6334
---------------	-------------	------------------------

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

Name of Employer Anthony DeMonte DDS Inc	Occupation Owner
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 01 / 2014

**Transaction ID : AA7B06E7986C74A8BBD7**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Bruce Clark**

Mailing Address 6314 W Park Ave

City Houma	State LA	Zip Code 70364-2234
---------------	-------------	------------------------

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

Name of Employer Bruce Clark Insurance Agency, Ltd	Occupation Owner
---	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 27 / 2014

**Transaction ID : A5F6B653470A2492F9AA**

Amount of Each Receipt this Period  
2600.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Matherne**

Mailing Address 26389 Hwy 40

City State Zip Code  
Folsom LA 70437-7777

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

Name of Employer Occupation  
Global Resources Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 11 / 2014

**Transaction ID : A3D27DCE4BF3B4C519F6**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**The 2344 Brightside, LLC**

Mailing Address P.O. Box 709

City State Zip Code  
Houma LA 70361-0709

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2014

**Transaction ID : A8EFD1EC4EA5945FFA0B**

Amount of Each Receipt this Period  
250.00

See Attribution Below

**C.** Full Name (Last, First, Middle Initial)  
**Frank Kowle**

Mailing Address P.O. Box 709

City State Zip Code  
Houma LA 70361-0709

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

Name of Employer Occupation  
The 2344 Brightside, LLC Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 01 / 2014

**Transaction ID : A52CB01D00BA84673A64**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

1250.00

20000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Josef Hensgens</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2014</b>
Mailing Address <b>9110 Pecan Tree</b>		Amount of Each Disbursement this Period <b>450.00</b> Transaction ID : <b>BC84962BCC5DA49A5A3F</b>
City <b>Baton Rouge</b> State <b>LA</b> Zip Code <b>70810-7043</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Theo Thyssen</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2014</b>
Mailing Address <b>1709 Oleander</b>		Amount of Each Disbursement this Period <b>500.00</b> Transaction ID : <b>BFD0591465A634F88823</b>
City <b>Baton Rouge</b> State <b>LA</b> Zip Code <b>70802-4065</b>	Purpose of Disbursement <b>Payroll</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Richard Owen</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2014</b>
Mailing Address <b>107 Lirette St.</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>B278C98CAEF264939A21</b>
City <b>Houma</b> State <b>LA</b> Zip Code <b>70360-8019</b>	Purpose of Disbursement <b>Sign Installation</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Brandon Verdum</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2014</b>
Mailing Address 199 Elysian Dr		Amount of Each Disbursement this Period <b>577.50</b> Transaction ID : <b>B08C8FB91D8C74636ADA</b>
City <b>Houma</b>	State <b>LA</b>	
Zip Code <b>70363-6914</b>	Purpose of Disbursement <b>Sign Construction</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Beard &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 02 / 2014</b>
Mailing Address 10342 Ridgely Ave		Amount of Each Disbursement this Period <b>1302.00</b> Transaction ID : <b>B46F5FA31FE204F8C9E2</b>
City <b>Baton Rouge</b>	State <b>LA</b>	
Zip Code <b>70809-3222</b>	Purpose of Disbursement <b>Video Production</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hannah Lasyone</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 03 / 2014</b>
Mailing Address 6089 Twin Bridges Rd		Amount of Each Disbursement this Period <b>4500.00</b> Transaction ID : <b>BF1D4167994F446B590D</b>
City <b>Alexandria</b>	State <b>LA</b>	
Zip Code <b>71303-7710</b>	Purpose of Disbursement <b>Payroll</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6379.50</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Hannah Dake Pickle</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1525 North Bertrand Drive		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : BC8E3E3592F634EAA9E4</b>
City Lafayette	State LA Zip Code 70506-2109	
Purpose of Disbursement Payroll	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Active Engagement</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 44084 Riverside Parkway, Suite 350		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : B2FD265738F1940D0B2A</b>
City Lansdowne	State VA Zip Code 20176-6823	
Purpose of Disbursement List Purchase	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Brave New Television</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 13716 Shady Hollow		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : B74EC80C5FA9D45D98F5</b>
City Denham Springs	State LA Zip Code 70726-8822	
Purpose of Disbursement Media Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 19			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Machado &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 3111 Newman Rd.		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : BB44AA198DB64465D99A</b>
City Fairfax	State VA	
Zip Code 22030	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 205 Pennsylvania Ave., SE		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : B181DF49FFD954DDAB02</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement FEC Compliance Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Beast Digital</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address PO Box 141251		Amount of Each Disbursement this Period 5129.00 <b>Transaction ID : B683B10318CD44BE298D</b>
City Dallas	State TX	
Zip Code 75214-1251	Purpose of Disbursement Digital Strategy Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10629.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Hannah Lasyone</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6089 Twin Bridges Rd		Amount of Each Disbursement this Period 1800.00 <b>Transaction ID : B9540E4514CCB4C4E886</b>
City Alexandria	State LA	
Zip Code 71303-7710	Purpose of Disbursement Payroll	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Brave New Television</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 13716 Shady Hollow		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : B4B05745E272F40CFA48</b>
City Denham Springs	State LA	
Zip Code 70726-8822	Purpose of Disbursement Media Production	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Church Bridge Consulting LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 14311 Wilson Way Dr		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : B8B17B7FEEEEC94D98B1E</b>
City Baton Rouge	State LA	
Zip Code 70817-5247	Purpose of Disbursement Voter Outreach Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6600.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

Full Name (Last, First, Middle Initial) <b>A. Brave New Television</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 13716 Shady Hollow		Amount of Each Disbursement this Period 8209.00 <b>Transaction ID : B62FE76F9F70A4AA4919</b>
City Denham Springs	State LA	
Zip Code 70726-8822	Purpose of Disbursement Media Production	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Super Sign Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 825 West California Ave		Amount of Each Disbursement this Period 11825.00 <b>Transaction ID : B42407367A5124CDE8DE</b>
City Ruston	State LA	
Zip Code 71270-4911	Purpose of Disbursement Campaign Materials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Brewer Wholesale, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 7081 Park Avenue		Amount of Each Disbursement this Period 3050.00 <b>Transaction ID : B1DF82E55F74D4566840</b>
City Houma	State LA	
Zip Code 70364-2847	Purpose of Disbursement Campaign Car Purchase	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	23084.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 19			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A. Mrs. Hannah Dake Pickle**

Full Name (Last, First, Middle Initial)  
Mailing Address 1525 North Bertrand Drive

City Lafayette State LA Zip Code 70506-2109

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 07 / 25 / 2014

Amount of Each Disbursement this Period: 1800.00

Transaction ID : BE215334B16B8454C81A

**B. Hannah Lasyone**

Full Name (Last, First, Middle Initial)  
Mailing Address 6089 Twin Bridges Rd

City Alexandria State LA Zip Code 71303-7710

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 07 / 25 / 2014

Amount of Each Disbursement this Period: 1800.00

Transaction ID : B5F21C78A8D2542B2974

**c. Stripe**

Full Name (Last, First, Middle Initial)  
Mailing Address 3180 18th Street, Suite 100

City San Francisco State CA Zip Code 94110-2043

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 08 / 02 / 2014

Amount of Each Disbursement this Period: 214.28

Transaction ID : BE2979D516E9A466E89C

**SUBTOTAL** of Disbursements This Page (optional) ..... 3814.28

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 19			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Lenar**

**A. Taxi Cabs**

Full Name (Last, First, Middle Initial)  
Mailing Address Multiple Taxi Cab Vendors

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Taxi Cab Service in Washington, DC

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 08 / 02 / 2014

Amount of Each Disbursement this Period: 238.34

Transaction ID : BEE8DBC2846424BE4A74

**B. Mrs. Hannah Dake Pickle**

Full Name (Last, First, Middle Initial)  
Mailing Address 1525 North Bertrand Drive

City Lafayette State LA Zip Code 70506-2109

Purpose of Disbursement  
Expense Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 07 / 2014

Amount of Each Disbursement this Period: 78.15

Transaction ID : B4B175469049B46728F5

**c. Josef Hensgens**

Full Name (Last, First, Middle Initial)  
Mailing Address 9110 Pecan Tree

City Baton Rouge State LA Zip Code 70810-7043

Purpose of Disbursement  
Expense Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 07 / 07 / 2014

Amount of Each Disbursement this Period: 55.21

Transaction ID : BA309B94A9BFC4E31914

**SUBTOTAL** of Disbursements This Page (optional) ..... 371.70

**TOTAL** This Period (last page this line number only) ..... 61128.48