

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
Louisiana Values PAC

ADDRESS (number and street) PO Box 325  
Check if different than previously reported. (ACC) Minden LA 71058

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00466904 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 29 / 2012 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Susan Shaw

Signature of Treasurer Susan Shaw [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Louisiana Values PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		67897.83
(b) Cash on Hand at Beginning of Reporting Period.....	56524.24	
(c) Total Receipts (from Line 19) .....	37759.20	75834.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	94283.44	143731.88
7. Total Disbursements (from Line 31).....	28689.32	78137.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	65594.12	65594.12
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Louisiana Values PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	34000.00	72000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	34000.00	72000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	34000.00	72000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	3759.20	3834.05
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	37759.20	75834.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	37759.20	75834.05

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14689.32	33637.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14689.32	33637.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	44500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28689.32	78137.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28689.32	78137.76

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	34000.00	72000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34000.00	72000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14689.32	33637.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3759.20	3834.05
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10930.12	29803.71

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
<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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial) <b>A. C. Markham Dickson</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2012 <b>Transaction ID : SA11AI.4626</b>
Mailing Address PO Box 51367		Amount of Each Receipt this Period 2500.00
City Shreveport	State LA	Zip Code 71135
FEC ID number of contributing federal political committee. C	Name of Employer Morris & Dickson Co.	Occupation Info Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Markham A. Dickson Jr.</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2012 <b>Transaction ID : SA11AI.4628</b>
Mailing Address P.O. Box 51367		Amount of Each Receipt this Period 2500.00
City Shreveport	State LA	Zip Code 71135
FEC ID number of contributing federal political committee. C	Name of Employer Morris & Dickson	Occupation Executive
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. G. Archer Frierson II</b>		Date of Receipt MM / DD / YYYY 09 / 28 / 2012 <b>Transaction ID : SA11AI.4702</b>
Mailing Address 10985 Harts Island Road		Amount of Each Receipt this Period 5000.00
City Shreveport	State LA	Zip Code 71115
FEC ID number of contributing federal political committee. C	Name of Employer Frierson Brothers Interests	Occupation Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<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)  
**Louisiana Values PAC**

**A. Ivy Frierson**  
Full Name (Last, First, Middle Initial)

Mailing Address 10985 Harts Island Road

City Shreveport State LA Zip Code 71115

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.4705**

Amount of Each Receipt this Period  
5000.00

**B. Grady C. Golden Sr.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 295

City Shreveport State LA Zip Code 71162

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

Name of Employer Builders Supply Company, Inc. Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : SA11AI.4650**

Amount of Each Receipt this Period  
3000.00

**C. Kathi Hamel**  
Full Name (Last, First, Middle Initial)

Mailing Address 4649 Dixie Garden Loop

City Shreveport State LA Zip Code 71105

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

Name of Employer Info Requested Occupation Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : SA11AI.4709**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13000.00
<b>TOTAL</b> 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 8 OF 17
<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)  
**Louisiana Values PAC**

**A. Milton Hamel**  
Full Name (Last, First, Middle Initial)

Mailing Address 4649 Dixie Garden Loop

City Shreveport State LA Zip Code 71105

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 28 / 2012  
Transaction ID : SA11AI.4707

Amount of Each Receipt this Period  
5000.00

**B. Alan W. Murphy**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Travis Street Suite 1910

City Shreveport State LA Zip Code 71101

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

Name of Employer Occupation  
Murco Oil & Gas, LLC Co-Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 28 / 2012  
Transaction ID : SA11AI.4704

Amount of Each Receipt this Period  
5000.00

**C. Phillip Rozeman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1760

City Shreveport State LA Zip Code 71166

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

Name of Employer Occupation  
Self Employed Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 31 / 2012  
Transaction ID : SA11AI.4657

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	34000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<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)  
**Louisiana Values PAC**

**A. United Airlines**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Grand Plaza Dr.  
City Houston State TX Zip Code 77067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2012  
**Transaction ID : SA15.4729**  
Amount of Each Receipt this Period  
1879.60  
Refund for Excess Airfare Charge

**B. United Airlines**  
Full Name (Last, First, Middle Initial)  
Mailing Address 900 Grand Plaza Dr.  
City Houston State TX Zip Code 77067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2012  
**Transaction ID : SA15.4730**  
Amount of Each Receipt this Period  
1879.60  
Refund for Excess Airfare Charge

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3759.20
<b>TOTAL</b> This Period (last page this line number only).....▶	3759.20

**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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. Beads By the Dozen**

Mailing Address 333 Edwards Avenue

City State Zip Code  
New Orleans LA 71023

Purpose of Disbursement  
Beads

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 24 / 2012

**Transaction ID : SB21B.4641**

Amount of Each Disbursement this Period

252.80

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City State Zip Code  
Atlanta GA 30320

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 07 / 2012

**Transaction ID : SB21B.4613**

Amount of Each Disbursement this Period

3026.40

Full Name (Last, First, Middle Initial)

**C. Enterprise**

Mailing Address 4030 George J Bean Pkwy

City State Zip Code  
Tampa FL 33607

Purpose of Disbursement  
Rental Car

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2012

**Transaction ID : SB21B.4669**

Amount of Each Disbursement this Period

726.54

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

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

4005.74

**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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. Saddlebrook Resorts**

Mailing Address 5700 Saddlebrook Way

City Wesley Chapel State FL Zip Code 33543

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2012

Transaction ID : **SB21B.4667**

Amount of Each Disbursement this Period

1708.75

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2012

Transaction ID : **SB21B.4727**

Amount of Each Disbursement this Period

1879.60

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2012

Transaction ID : **SB21B.4728**

Amount of Each Disbursement this Period

1879.60

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

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

5467.95

**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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 13 / 2012

Transaction ID : **SB21B.4636**

Amount of Each Disbursement this Period: 832.60

Category/Type

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 13 / 2012

Transaction ID : **SB21B.4638**

Amount of Each Disbursement this Period: 832.60

Category/Type

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement Seat Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 13 / 2012

Transaction ID : **SB21B.4640**

Amount of Each Disbursement this Period: 39.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1704.20

**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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Baggage Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2012

Transaction ID : **SB21B.4662**

Amount of Each Disbursement this Period

50.00

**B. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Meal

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2012

Transaction ID : **SB21B.4675**

Amount of Each Disbursement this Period

16.08

**C. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Luggage Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2012

Transaction ID : **SB21B.4682**

Amount of Each Disbursement this Period

50.00

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

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

116.08

**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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 900 Grand Plaza Dr.

City Houston State TX Zip Code 77067

Purpose of Disbursement  
Meal

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 06 / 2012

**Transaction ID : SB21B.4685**

Amount of Each Disbursement this Period

16.08

Full Name (Last, First, Middle Initial)

**B. Winfrey & Company**

Mailing Address 228 S Washington Street, Suite B20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 25 / 2012

**Transaction ID : SB21B.4699**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

2516.08

13810.05

**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 checked="" 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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. ANDERSON FOR CONGRESS**

Mailing Address 160 LOUISVILLE RD

City GROVETOWN State GA Zip Code 30813

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: GA District: 12

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4723

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. KERRY BENTIVOLIO FOR US CONGRESS**

Mailing Address 260 WHILE PINE TRAIL

City MILFORD State MI Zip Code 48381

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MI District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4693

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MCSALLY FOR CONGRESS**

Mailing Address PO BOX 18612

City TUCSON State AZ Zip Code 85731

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4690

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

6	0	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

6	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. MULLIN FOR CONGRESS**

Mailing Address PO BOX 3681

City MUSKOGEE State OK Zip Code 74402

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: OK District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4695

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. PATON FOR CONGRESS**

Mailing Address PO BOX 68758

City TUCSON State AZ Zip Code 85737

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4688

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. VERNON PARKER FOR CONGRESS**

Mailing Address 5635 E LINCOLN DRIVE  
# 18

City PARADISE VALLEY State AZ Zip Code 85253

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 09

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	2

Transaction ID : SB23.4725

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6	0	0	0	0	0	0	0	0	0
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6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---



**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 checked="" 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)  
**Louisiana Values PAC**

Full Name (Last, First, Middle Initial)

**A. WEBER FOR CONGRESS**

Mailing Address 1100 GULF FREEWAY  
SUITE 100

City LEAGUE CITY State TX Zip Code 77573

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: TX District: 14

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2012

Transaction ID : SB23.4697

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2000.00

14000.00