

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
CLAITOR FOR CONGRESS

ADDRESS (number and street) 7520 PERKINS RD
SUITE 170
 Check if different than previously reported. (ACC) BATON ROUGE LA 70808

2. **FEC IDENTIFICATION NUMBER** C C00554253 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
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 M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
08 / 03 / 2014 through 09 / 30 / 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 CHELSEA BONNECAZE

Signature of Treasurer CHELSEA BONNECAZE [Electronically Filed] Date M M / D D / Y Y Y Y
10 / 15 / 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.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CLAITOR FOR CONGRESS

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

	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))....	114202.35	351470.46
(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)).....	114202.35	351470.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	68640.53	226603.06
(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)).....	68640.53	226603.06
8. Cash on Hand at Close of Reporting Period (from Line 27).....	124867.40	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

CLAITOR FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 03 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

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).....	99717.35	297104.17
(ii) Unitemized	5485.00	16806.64
(iii) TOTAL of contributions from individuals	105202.35	313910.81
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	8500.00	24101.14
(d) The Candidate	500.00	13458.51
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	114202.35	351470.46
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	114202.35	351470.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	68640.53	226603.06
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. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	68640.53	226603.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	79305.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	114202.35
25. SUBTOTAL (add Line 23 and Line 24).....	193507.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68640.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	124867.40

**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 84
	<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	

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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James B. Akers

Mailing Address 911 Masterson

City Baton Rouge State LA Zip Code 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6103

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
John A Alario

Mailing Address 469 Vine Dr

City Westwego State LA Zip Code 70094

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

Name of Employer LA State Senate Occupation State Senator

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 / 18 / 2014

Transaction ID : SA11AI.5831

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Beth B. Allison

Mailing Address 17812 Five Oaks Drive

City Baton Rouge State LA Zip Code 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5890

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 6 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Beth L. Allison

Mailing Address 17812 Five Oaks Drive

City Baton Rouge State LA Zip Code 70810

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

Name of Employer **BEST EFFORTS IN PROGRESS** Occupation **BEST EFFORTS IN PROGRESS**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6062

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Glenn Ally

Mailing Address 306 Stelly Road

City Lafayette State LA Zip Code 70503

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

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.5952

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Lee Joseph "Jody" Amedee III

Mailing Address 2111 South Burnside Ave

City Gonzales State LA Zip Code 70737

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

Name of Employer **Gauthier & Amedee APLC** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6050

Amount of Each Receipt this Period
500.00

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

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

950.00

**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 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lee Joseph "Jody" Amedee III

Mailing Address 2111 South Burnside Ave

City State Zip Code
Gonzales LA 70737

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

Name of Employer Occupation
Gauthier & Amedee APLC Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6051

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Carol A. Appel

Mailing Address 3832 Edenborn Avenue

City State Zip Code
Metairie LA 70002

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.5929

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jack M. Bailey Jr.

Mailing Address 2790 Fairfield Avenue

City State Zip Code
Shreveport LA 71104

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 26 / 2014

Transaction ID : SA11AI.5938

Amount of Each Receipt this Period
1500.00

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

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

3000.00

**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 84
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lauren M. Barfield		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2014	
Mailing Address 7657 Claret Avenue		Transaction ID : SA11AI.6025	
City Baton Rouge	State LA	Zip Code 70809	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Robert H. Baumann		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 1132 Kimbro Drive		Transaction ID : SA11AI.6059	
City Baton Rouge	State LA	Zip Code 70808	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Louisiana Independent Oil & Gas Associ	Occupation Director of Research and Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 700.00		

Full Name (Last, First, Middle Initial) C. Christopher L. Belleau M.D.		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 5000 Hennessy Blvd		Transaction ID : SA11AI.5822	
City Baton Rouge	State LA	Zip Code 70808	Amount of Each Receipt this Period _____ 1200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Bone & Joint Clinic	Occupation Doctor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4450.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1900.00
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 Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Berard

Mailing Address PO Box 52612

City State Zip Code
Lafayette LA 70505

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

Name of Employer Occupation
Dr. Berard & Associates REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.5942

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Andrew C. Black

Mailing Address 3048 Reymond Avenue

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.5902

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Carmack M. Blackmon

Mailing Address PO Box 44035

City State Zip Code
Baton Rouge LA 70804

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6073

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Harold M. Block

Mailing Address PO Box 510

City State Zip Code
Thibodeaux LA 70302

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.5966

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Barry O. Blumberg

Mailing Address 2132 Rue Beauregard

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Blumberg and Associates, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.6119

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Gregory E. Bodin

Mailing Address 2445 Terrace Ave.

City State Zip Code
Baton Rouge LA 70806

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6097

Amount of Each Receipt this Period
250.00

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

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

1150.00

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

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

FOR LINE NUMBER: PAGE 11 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Philip Bohrer

Mailing Address 8712 Jefferson Hwy. Suite B

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Bohrer Law Firm, L.L.C. Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2014

Transaction ID : SA11AI.5962

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John F. Bolter

Mailing Address 8642 Rainwood Ave.

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.5958

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
John A. Braymer

Mailing Address 1259 Elmcrest Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11AI.5873

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 12 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Phil Breaux

Mailing Address **PO Box 116**

City **St. Gabriel** State **LA** Zip Code **70776**

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

Name of Employer **Breaux & Hornstein Attorneys at Law** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.6093

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Don G. Briggs

Mailing Address **211 Leicester**

City **Lafayette** State **LA** Zip Code **70508**

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

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.6075

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Patrick Broderick

Mailing Address **1667 Pollard Parkway**

City **Baton Rouge** State **LA** Zip Code **70808**

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

Name of Employer **GEC INC** Occupation **Engineer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : SA11AI.5861

Amount of Each Receipt this Period
100.00

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

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

2350.00

**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 13 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Coleman Brown

Mailing Address 836 Mouton St

City State Zip Code
Baton Rouge LA 70806

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

Name of Employer Occupation
Self employed Architect

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 / 13 / 2014

Transaction ID : SA11AI.5793

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Denise L. Brown

Mailing Address 850 Emerald Street

City State Zip Code
New Orleans LA 70124

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

Name of Employer Occupation
REQUESTED Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.5968

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
William T. Brown

Mailing Address 2015 Lake Hills Pkwy.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6141

Amount of Each Receipt this Period
300.00

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

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

3800.00

**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 14 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph Broyles

Mailing Address 6554 Pikes Lane

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
LWHA Physician

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.5903

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Robert Burns

Mailing Address 4155 Essen Ln

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 06 / 2014

Transaction ID : SA11AI.5964

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
AJ Cannata

Mailing Address PO Box 1636

City State Zip Code
Morgan City LA 70381

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.6169

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Juan A. Carrillo

Mailing Address 998 Stanford Avenue, Apartment 312

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 26 2014

Transaction ID : SA11AI.5933

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Stephen F Carter

Mailing Address PO Box 80145

City State Zip Code
Baton Rouge LA 70896

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

Name of Employer LA HOUSE OF REPRESENTATIVES Occupation REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 22 2014

Transaction ID : SA11AI.6030

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Preston J. Castille Jr.

Mailing Address PO Box 2471

City State Zip Code
Baton Rouge LA 70821

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 14 2014

Transaction ID : SA11AI.5884

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 16 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cazayoux & Ewing, LLC

Mailing Address 257 Maximilian St.

City Baton Rouge State LA Zip Code 70802

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA11AI.5974

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jim Claitor

Mailing Address PO Box 3732

City Baton Rouge State LA Zip Code 70821

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

Name of Employer Occupation
Claitor Children LLC Partner

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6078

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Jon Claitor

Mailing Address PO Box 3732

City Baton Rouge State LA Zip Code 70821

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

Name of Employer Occupation
Claitor Children LLC Partner

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6079

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 17 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert G Claitor

Mailing Address 5925 Highland Road

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Claitor's Law Books and Publishing Publisher

Receipt For: 2014
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
7800.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : SA11AI.5815

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Robert G. Claitor Jr.

Mailing Address 686 College Hill Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Claitor's Publishing Book Publisher

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6040

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
George T. Clark III

Mailing Address 1325 Charmaine Avenue

City State Zip Code
Baton Rouge LA 70806

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2014

Transaction ID : SA11AI.5860

Amount of Each Receipt this Period
250.00

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 18 OF 84
	<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	

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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
A.M. Tony Clayton

Mailing Address 3741 LA Highway 1 South

City Port Allen State LA Zip Code 70767

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

Name of Employer Self employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5802

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Tony Clayton

Mailing Address 3741 LA Highway 1 South

City Port Allen State LA Zip Code 70767

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

Name of Employer A.M. Tony Clayton Attorney at Law Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.6112

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
John R. Clifford

Mailing Address 423 Woodleigh Drive

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Self Occupation Retired

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 16 / 2014

Transaction ID : SA11AI.5900

Amount of Each Receipt this Period
 500.00

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

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

2500.00

**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 19 OF 84
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) David Corbin		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address REQUESTED		Transaction ID : SA11AI.6099
City	State	Zip Code
	LA	70809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer REQUESTED	Occupation Chiropractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) William Courson		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 12451 Highland Road		Transaction ID : SA11AI.5879
City	State	Zip Code
Baton Rouge	LA	70810
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Marc Couvillion		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 6623 Pikes Lane		Transaction ID : SA11AI.6110
City	State	Zip Code
Baton Rouge	LA	70808
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Poparazzi Products	Occupation Product Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 20 OF 84

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Curtis Creed

Mailing Address 5884 Chandler Drive

City Baton Rouge State LA Zip Code 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5925

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Rebecca Cunard

Mailing Address 9214 Interline Avenue

City Baton Rouge State LA Zip Code 70809

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

Name of Employer Rebecca Cunard Attorney Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6081

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Kevin E. Cunningham

Mailing Address 5341 Riverbend Boulevard

City Baton Rouge State LA Zip Code 70820

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.5896

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**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 21 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jack M Dampf

Mailing Address 103 W. Woodstone Ct.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Dampf, Thibaut, Hessburg, LLP Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6068

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Robert Davidge

Mailing Address 9205 Hilltrace Avenue

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Self Retired

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2014

Transaction ID : SA11AI.6123

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles R. Davoli

Mailing Address 6513 Perkins Road

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Charles R. Davoli Attorney at Law Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.6105

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 22 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lev M Dawson

Mailing Address P Box 785

City State Zip Code
Delhi LA 71232

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

Name of Employer Occupation
Self employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5787

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Lev M Dawson

Mailing Address P Box 785

City State Zip Code
Delhi LA 71232

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

Name of Employer Occupation
Self employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5790

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Judy E. Day

Mailing Address 19664 Old Perkins Road E.

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
Women's Hospital Consultant

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6048

Amount of Each Receipt this Period
 200.00

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: (check only one)	PAGE 23 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven A. Debosier

Mailing Address 1075 Government St.

City State Zip Code
Baton Rouge LA 70802

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

Name of Employer Occupation
Dudley DeBosier Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6133

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John L Donahue Jr

Mailing Address 123 Maple Ridge Way

City State Zip Code
Covington LA 70433

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

Name of Employer Occupation
Donahue Fauret Contractors, In General Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5799

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Chad Dudley

Mailing Address 922 Hollystone Dr.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6131

Amount of Each Receipt this Period
1000.00

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

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

4500.00

**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 24 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mark A. Dumaine

Mailing Address 7219 Sedley Circle

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
19th Judicial District Attorney Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11AI.5863

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
David M. Ellison Jr.

Mailing Address 336 Louisiana Avenue

City State Zip Code
Baton Rouge LA 70802

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

Name of Employer Occupation
REQUESTED Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 04 / 2014

Transaction ID : SA11AI.5954

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Andrew B. Ezell

Mailing Address 10761 Perkins Road, Suite A

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
Ezwl Law Firm, LLC Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.6084

Amount of Each Receipt this Period
250.00

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

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

1000.00

**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 25 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David M. Ferrell

Mailing Address PO Box 64682

City State Zip Code
Baton Rouge LA 70896

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

Name of Employer Occupation
Louisiana Millwork, LLC Territory Manager

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.6165

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lynda W. Fldman

Mailing Address 17740 W. Lakeway Drive

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2014

Transaction ID : SA11AI.5917

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Candy R. Forbes

Mailing Address 37555 LA HWY 16

City State Zip Code
Denham Springs LA 70706

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11AI.6003

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 26 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Brett Furr

Mailing Address 1955 Steele Blvd

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Taylor Porter Attorney

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.6170

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Kevin G. Garrett

Mailing Address 6317 Audubon Oaks

City State Zip Code
Alexandria LA 71301

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11AI.5923

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert D. Gart

Mailing Address 5633 Lost Oak Drive

City State Zip Code
Baton Rouge LA 70817

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : SA11AI.5905

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 27 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Todd Gaudin

Mailing Address 4021 W.E Heck Ct. #L

City State Zip Code
Baton Rouge LA 70816

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

Name of Employer Occupation
Gaudin Law Firm, LLC Attorney

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11AI.6086

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Andre P. Gauthier

Mailing Address 2111 S. Burnside Avenue

City State Zip Code
Gonzales LA 70737

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

Name of Employer Occupation
Gauthier & Amedee APLC Attorney

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6064

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Benjamin N. Gibson

Mailing Address 228 Napoleon Street

City State Zip Code
Baton Rouge LA 70802

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

Name of Employer Occupation
REQUESTED Attorney

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 28 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles W. Gladney Jr.

Mailing Address 7922 Suma Avenue, Suite A2

City Baton Rouge State LA Zip Code 70809

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

Name of Employer Southland Trace, LLC Occupation Agent

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6149

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Chris Glisson

Mailing Address PO Box 1909

City Baton Rouge State LA Zip Code 70821

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

Name of Employer McGlynn Glisson & Mouton Law Firm Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5894

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Trenton A. Grand

Mailing Address 10537 Kentshire Court, Suite A

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Grand Law Firm LLC Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.6009

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 29 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Milton G. Graugnard

Mailing Address 2929 Svendson Drive

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Cajun Constructors, Inc. Vice President

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.6033

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Christopher Grenier

Mailing Address 7315 Richards Drive

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2014

Transaction ID : SA11AI.5907

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
David Guerry

Mailing Address 4041 Essen Lane
Ste 600

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Long Law Firm Attorney

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 / 13 / 2014

Transaction ID : SA11AI.5812

Amount of Each Receipt this Period
1000.00

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

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

2500.00

**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 30 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hannah, Colvin & Pipes Attorneys at Law

Mailing Address 10626 Timberlake Drive

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.6019

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Peter Harris

Mailing Address 1039 E Hwy 30

City State Zip Code
Gonzales LA 70737

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

Name of Employer Occupation
Gulfcoast Pharmaceutical Spec. 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
 08 / 18 / 2014

Transaction ID : SA11AI.5835

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Marlon Harrison

Mailing Address 622 Shady Lake Pkwy.

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
Marlon Harrison Law Firm, LLC REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.5960

Amount of Each Receipt this Period
500.00

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

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

1750.00

**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 31 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James R Hatcher

Mailing Address 8655 Jefferson Hwy
#15

City Baton Rouge State LA Zip Code 70809

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

Name of Employer Self Employed Occupation MD & Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.5829

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Hawkins

Mailing Address 1000 Louisiana, Suite 4300

City Houston State TX Zip Code 77002

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

Name of Employer Targa Midstream Services, LLC Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5993

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Randy Hayden

Mailing Address 12739 North Oak Hills Parkway

City Baton Rouge State LA Zip Code 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5867

Amount of Each Receipt this Period
 500.00

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

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

2500.00

**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 32 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Cordell H. Haymon

Mailing Address 672 Nelson Drive

City Baton Rouge State LA Zip Code 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5995

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ryan K. Haynie

Mailing Address PO Box 44032

City Baton Rouge State LA Zip Code 70804

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6151

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Craig Robert "Bob" Hensgens

Mailing Address 305 Wilkinson

City Gueydan State LA Zip Code 70542

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.5970

Amount of Each Receipt this Period
750.00

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

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

1500.00

**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 33 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
G. Michael Hollingsworth

Mailing Address 7122 Moniteau Court

City Baton Rouge State LA Zip Code 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.5956

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
G. Michael Hollingsworth

Mailing Address 7122 Moniteau Court

City Baton Rouge State LA Zip Code 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6043

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Darrell W. Hunt

Mailing Address 5518 Moss Side Lane

City Baton Rouge State LA Zip Code 70808

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

Name of Employer The Alchemind Group Occupation Consultant

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6056

Amount of Each Receipt this Period
500.00

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

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

2500.00

**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 34 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Nicholas James

Mailing Address 500 Welham Loop

City State Zip Code
La Place LA 70068

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

Name of Employer Occupation
Mexichem Engineer

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.6159

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Eduardo J. Jenkins

Mailing Address 1119 North Blvd.

City State Zip Code
Baton Rouge LA 70802

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

Name of Employer Occupation
Eduardo J. Jenkins Landscape Architect REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.6164

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ronnie Johns

Mailing Address 3701 Maplewood Dr
Suite 2

City State Zip Code
Sulphur LA 70663

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

Name of Employer Occupation
Self Employed Insurance Agent

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 / 18 / 2014

Transaction ID : SA11AI.5833

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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 35 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Alvah Y. Johnson

Mailing Address 11423 East Black Oak Drive

City State Zip Code
Baton Rouge LA 70815

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.5936

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Christopher K. Jones

Mailing Address 770 Nelson Dr.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation Information Requested
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6092

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert E. Kleinpeter

Mailing Address 6832 S Woodgate

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Kleinpeter & Schwartzberg, LLC Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.5979

Amount of Each Receipt this Period
500.00

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

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

800.00

**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 36 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gary P. Koederitz

Mailing Address 17930 Inverness Avenue

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.6011

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gordon S. LeBlanc Jr.

Mailing Address 3924 Chatfield Avenue

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5871

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
J. Burton Leblanc IV

Mailing Address 3125 McCarroll Drive

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.6114

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 37 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Leclere

Mailing Address 742 Riverview Drive

City State Zip Code
Baton Rouge LA 70816

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.5909

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Wendell G Lindsay

Mailing Address 5874 Chandler Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : SA11AI.6127

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Joseph Lipsey

Mailing Address PO Box 83280

City State Zip Code
Baton Rouge LA 70884

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.5983

Amount of Each Receipt this Period
625.00

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

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

1375.00

**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 38 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joseph F. Lovett

Mailing Address 6254 Overton Drive

City Baton Rouge State LA Zip Code 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11AI.5911

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Warren C. Lowe

Mailing Address 913 South College Ste. 204

City Lafayette State LA Zip Code 70503

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Donald G. Luther Jr.

Mailing Address 375 Dentation Drive

City Baton Rouge State LA Zip Code 70808

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period
1000.00

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

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

1750.00

**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 39 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Main

Mailing Address 301 Southern Rd

City State Zip Code
New Orleans LA 70123

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.5985

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Daniel Martiny

Mailing Address 131 Airline Drive, Suite 201

City State Zip Code
Metairie LA 70001

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

Name of Employer REQUESTED Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.5987

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Camp Matens

Mailing Address 4554 Emory Avenue

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Self Occupation Retired

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.6176

Amount of Each Receipt this Period
250.00

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

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

1250.00

**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 40 OF 84
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Van R. Mayhall Jr.		Date of Receipt M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address 1122 Thoreau Drive		Transaction ID : SA11AI.5892	
City Baton Rouge	State LA	Zip Code 70808	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation REQUESTED Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. Matthew G. McKay		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 11377 Airline Highway		Transaction ID : SA11AI.5976	
City Baton Rouge	State LA	Zip Code 70816	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation REQUESTED Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. W. S. McKenzie		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 312 S. Lakeshore Drive		Transaction ID : SA11AI.6116	
City Baton Rouge	State LA	Zip Code 70808	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation REQUESTED Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00

**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 41 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lisa A. McLachlan

Mailing Address 3241 Desoto Street

City State Zip Code
New Orleans LA 70119

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

Name of Employer Occupation
Musgrave, McLachlan & Penn LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.5851

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
M. Scott McLaughlin

Mailing Address 10725 Shoreline Drive

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6053

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gary Millet

Mailing Address PO Box 405

City State Zip Code
Prairieville LA 70769

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.5999

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 42 OF 84
	<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	

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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Fred Mills Jr.

Mailing Address 4711 A Main Hwy

City State Zip Code
St. Martinville LA 70582

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 03 / 2014

Transaction ID : SA11AI.5850

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Steven J. Moore

Mailing Address 5613 Perkins Road, Suite 107

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Steven J. Moore, L.L.C. Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6071

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Patricia M. Moroney

Mailing Address 518 Castle Kirk Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Louisiana State University Occupation Professor

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6153

Amount of Each Receipt this Period

100.00

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

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

850.00

**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 43 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John G. Murphy

Mailing Address 3045 Fritchie Drive

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6058

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Stephen C. Myers

Mailing Address 642 Ursuline Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer REQUESTED Occupation Realtor Broker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6083

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Susan Nickel

Mailing Address 308 Cornell Hm.

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5880

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 44 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael J. O'Connor

Mailing Address 19430 South Muirfield Circle

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.6029

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Leo J. Odom

Mailing Address 6810 Jefferson Hwy

City State Zip Code
Baton Rouge LA 70806

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.5946

Amount of Each Receipt this Period
1000.00

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

Mailing Address 8562 Jefferson Highway, Suite B

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer REQUESTED Occupation REQUESTED
Olinde & Mercer, LLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
783.67

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6179

Amount of Each Receipt this Period
783.67
In-kind - Fundraiser

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

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

4383.67

**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 45 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael E. Olinde

Mailing Address 4970 Bluebonnet Boulevard, Suite B

City Baton Rouge	State LA	Zip Code 70809
---------------------	-------------	-------------------

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

Name of Employer The Massad Olinde Group, LLC	Occupation Principal
--	-------------------------

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 20 / 2014

Transaction ID : SA11AI.6027

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Michael E. Olinde

Mailing Address 4970 Bluebonnet Boulevard, Suite B

City Baton Rouge	State LA	Zip Code 70809
---------------------	-------------	-------------------

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

Name of Employer The Massad Olinde Group, LLC	Occupation Principal
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1283.68

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6177

Amount of Each Receipt this Period
783.68

In-kind - Fundraiser

C. Full Name (Last, First, Middle Initial)
Suzanne Passman

Mailing Address 16004 Parkside Court

City Baton Rouge	State LA	Zip Code 70817
---------------------	-------------	-------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5877

Amount of Each Receipt this Period
500.00

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

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

1783.68

**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 46 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ruth M. Patrick

Mailing Address 888 Dubois Drive

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Occupation
Self Retired

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.6162

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
William H. Patrick III

Mailing Address 9311 Bluebonnet Boulevard

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.5978

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Steven L Payne

Mailing Address PO Box 26967

City State Zip Code
Oklahoma City OK 73126

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

Name of Employer Occupation
Frates Insurance & Rick Mgmt Managing Partner

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 / 18 / 2014

Transaction ID : SA11AI.5827

Amount of Each Receipt this Period
1000.00

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

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

1450.00

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

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

FOR LINE NUMBER: PAGE 47 OF 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James H. Peltier Jr.

Mailing Address 15043 Reveille Ave.

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
James H. Peltier, Jr. Attorney at Law REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.6135

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John W. Perry Jr.

Mailing Address REQUESTED

City State Zip Code
LA 70809

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.6035

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Donna B Pfefferle

Mailing Address 3113 Grand Way Avenue

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11AI.5875

Amount of Each Receipt this Period
250.00

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

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

1750.00

**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 48 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Suzette S. Polito

Mailing Address 7447 South Bocage Court

City Baton Rouge State LA Zip Code 70809

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

Name of Employer Self Occupation Homemaker

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6065

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Chad L. Prather

Mailing Address 1737 May Street

City Baton Rouge State LA Zip Code 70808

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

Name of Employer REQUESTED Occupation REQUESTED

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 / 11 / 2014

Transaction ID : SA11AI.5855

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 2786

City Baton Rouge State LA Zip Code 70821

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

Name of Employer Preis Gordon Law Firm Occupation Attorney

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 / 18 / 2014

Transaction ID : SA11AI.5837

Amount of Each Receipt this Period
1000.00

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

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

1600.00

**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 49 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donald W. Price

Mailing Address 8201 Jefferson Highway

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.5869

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James W. Quillin

Mailing Address 1227 Heyman Ln.

City State Zip Code
Alexandria LA 71303

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA11AI.5913

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Wade Randolph

Mailing Address 3232 Plantation Court

City State Zip Code
Baton Rouge LA 70820

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

Name of Employer REQUESTED Occupation REQUESTED
Riverside Transportation Business Owner

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.5921

Amount of Each Receipt this Period
500.00

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

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

1250.00

**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 50 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sean E Reilly

Mailing Address PO Box 66338

City State Zip Code
Baton Rouge LA 70896

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

Name of Employer Occupation
Lamar Advertising Executive

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 / 18 / 2014

Transaction ID : SA11AI.5823

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mike Reitz

Mailing Address 5525 Reitz Ave

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Blue Cross Blue Shield President

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 / 13 / 2014

Transaction ID : SA11AI.5796

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Claude F. Reynaud Jr.

Mailing Address 257 Napoleon St.

City State Zip Code
Baton Rouge LA 70802

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6095

Amount of Each Receipt this Period
250.00

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

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

2250.00

**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 51 OF 84
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Aidan C. Reynolds		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address PO Box 5165		Transaction ID : SA11AI.6088	
City Baton Rouge	State LA	Zip Code 70821	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aidan C. Reynolds Attorney at Law, LLC	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Robert L. Rieger Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2014	
Mailing Address 15839 Philemon Thomas Drive		Transaction ID : SA11AI.6061	
City Baton Rouge	State LA	Zip Code 70810	Amount of Each Receipt this Period _____ 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) C. Joe Rollins		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address 5136 Whitaker West		Transaction ID : SA11AI.5927	
City Centreville	State MS	Zip Code 39631	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Karen W. Saunders

Mailing Address 3247 Conway Drive

City Baton Rouge State LA Zip Code 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.5950

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Leslie Kay Sheffield

Mailing Address 19313 Links Ct

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Self Employed Occupation Anesthesiologist

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 / 18 / 2014

Transaction ID : SA11AI.5825

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Wendy L. Shiroda

Mailing Address PO Box 83280

City Baton Rouge State LA Zip Code 70884

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1875.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.5981

Amount of Each Receipt this Period
1875.00

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

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

3375.00

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

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

FOR LINE NUMBER: PAGE 53 OF 84
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven B. Spedale

Mailing Address 7009 Moniteau Court

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.6023

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Joseph T. Spinosa

Mailing Address PO Box 80158

City State Zip Code
Baton Rouge LA 70898

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

Name of Employer JTS Management Company, LLC Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.6017

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ladd Spring

Mailing Address PO Box 15674

City State Zip Code
Baton Rouge LA 70895

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

Name of Employer Capitol Buick GMC, LLC Occupation General Manager

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.6042

Amount of Each Receipt this Period
500.00

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

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

1500.00

**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 54 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bingham M Stewart

Mailing Address 5804 Boone Ave

City Baton Rouge State LA Zip Code 70808

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

Name of Employer Baton Rouge Title Company Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.6129

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
The Castille Group, LLC

Mailing Address 450 Laurel Street, Suite 1900

City Baton Rouge State LA Zip Code 70801

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

Name of Employer Occupation

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 / 07 / 2014

Transaction ID : SA11AI.5853

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Connie L. Thomas

Mailing Address 479 S. Chenier Drive

City Madisonville State LA Zip Code 70447

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.5997

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 55 OF 84
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David A. Thomas

Mailing Address 2824 Tradition Ave.

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6090

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gregory H. Town

Mailing Address 5845 Hyacinth Avenue

City State Zip Code
Baton Rouge LA 70808

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

Name of Employer Colonial Life Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.6148

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jack Truitt

Mailing Address 149 N. New Hampshire Street

City State Zip Code
Covington LA 70433

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

Name of Employer The Truitt Law Firm Occupation Attorney

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5858

Amount of Each Receipt this Period
250.00

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

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

1500.00

**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 56 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Peggy A. Vidrine

Mailing Address 5648 North Shore Drive

City Baton Rouge State LA Zip Code 70817

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

Name of Employer Self Occupation Retired

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : SA11AI.6108

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Richard J. Ward

Mailing Address 79005 Musson Lane

City Maringouin State LA Zip Code 70757

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 14 / 2014

Transaction ID : SA11AI.5882

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Tim Wells

Mailing Address 17732 Highland Road Set. G #171

City Baton Rouge State LA Zip Code 70810

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

Name of Employer Self-Employed Occupation Contractor

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.6069

Amount of Each Receipt this Period
500.00

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

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

950.00

**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 57 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mack A White

Mailing Address 13841 Blackwater Road

City State Zip Code
Baker LA 70714

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

Name of Employer Occupation
Asset Security LLC Manager

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 / 13 / 2014

Transaction ID : SA11AI.5807

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Pamela E. Williams

Mailing Address 438 Pecan Meadow Drive

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.6001

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Luke O. Williamson

Mailing Address 5902 Forest Glen Lane

City State Zip Code
Baton Rouge LA 70775

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.6101

Amount of Each Receipt this Period
500.00

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

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

2250.00

**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 58 OF 84
	<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)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Randall W. Womack

Mailing Address 521 Laurel Street

City Baton Rouge State LA Zip Code 70801

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11AI.5857

Amount of Each Receipt this Period
500.00

B. 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)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

99717.35

**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 59 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACADIAN AMBULANCE SERVICE INC EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 98000

City LAFAYETTE State LA Zip Code 70509

FEC ID number of contributing federal political committee. **C** C00335570

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11C.6187

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

Mailing Address 655 BEACH STREET

City SAN FRANCISCO State CA Zip Code 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11C.6191

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
ARPAC

Mailing Address 451 FLORIDA STREET
BANK ONE CENTRE N TOWER 19TH FLOOR

City BATON ROUGE State LA Zip Code 70801

FEC ID number of contributing federal political committee. **C** C00226472

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : SA11C.6184

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

**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 60 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRPPA FEDPAC

Mailing Address 8712 Highway 23

City Belle Chasse State LA Zip Code 70037

FEC ID number of contributing federal political committee. **C C00221077**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2014

Transaction ID : SA11C.6183

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
HCA INC. GOOD GOVERNMENT FUND

Mailing Address PO BOX 550
ONE PARK PLAZA

City NASHVILLE State TN Zip Code 37203

FEC ID number of contributing federal political committee. **C C00067231**

Name of Employer Occupation

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
 09 / 02 / 2014

Transaction ID : SA11C.6189

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
SMOKE BEND ASSOCIATES LLC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 2805 HARVARD AVENUE
SUITE 102

City METAIRIE State LA Zip Code 70006

FEC ID number of contributing federal political committee. **C C00378950**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA11C.6185

Amount of Each Receipt this Period
500.00

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

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

1500.00

8500.00

**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 61 OF 84
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
CLAITOR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANIEL A CLAITOR

Mailing Address 7520 PERKINS RD
SUITE 70808

City State Zip Code
BATON ROUGE LA 70808

FEC ID number of contributing federal political committee. **C H4LA06112**

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2005.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
09		24		2014

Transaction ID : SA11D.6194

Amount of Each Receipt this Period

500.00

B. 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)

Election Cycle-to-Date

Date of Receipt

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

--

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)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

--

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

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

500.00
500.00

**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 62 OF 84		
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 216.96 Transaction ID : SB17.6207
City Ft Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Credit Card Fee	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. American Express		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO Box 360001		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6264
City Ft Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Credit Card Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Printing Center		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 280.13 Transaction ID : SB17.6210
City	State	
Zip Code	Purpose of Disbursement Printing	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:	

SUBTOTAL of Disbursements This Page (optional).....	747.09
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 63 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ARISTOTLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17.6221
City	State Zip Code	
Purpose of Disbursement Research	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. Authnet Gateway Billing		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 75.50 Transaction ID : SB17.6202
City	State Zip Code	
Purpose of Disbursement Website Services	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) c. Authnet Gateway Billing		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 72.00 Transaction ID : SB17.6289
City	State Zip Code	
Purpose of Disbursement Website Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3647.50
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 64 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Axiom Strategies			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 1251 NW Briarcliff Pkwy, Ste 85			Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6330
City Kansas City	State MO	Zip Code 64116	
Purpose of Disbursement General Campaign Consulting		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. Axiom Strategies			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1251 NW Briarcliff Pkwy, Ste 85			Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6345
City Kansas City	State MO	Zip Code 64116	
Purpose of Disbursement General Campaign Consulting		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) C. BEST BUY			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address			Amount of Each Disbursement this Period 250.69 Transaction ID : SB17.6223
City	State	Zip Code	
Purpose of Disbursement Office Supplies		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:	

SUBTOTAL of Disbursements This Page (optional).....	10250.69
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 65 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHELSEA BONNECAZE		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 7520 PERKINS RD SUITE 170		Amount of Each Disbursement this Period 1246.05 Transaction ID : SB17.6325
City BATON ROUGE	State LA	
Purpose of Disbursement Payroll; Reimbursement - Meal Expenses		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. CHELSEA BONNECAZE		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 7520 PERKINS RD SUITE 170		Amount of Each Disbursement this Period 1146.05 Transaction ID : SB17.6326
City BATON ROUGE	State LA	
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) C. CHELSEA BONNECAZE		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 7520 PERKINS RD SUITE 170		Amount of Each Disbursement this Period 1146.05 Transaction ID : SB17.6336
City BATON ROUGE	State LA	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	3538.15
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 66 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHELSEA BONNECAZE			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 7520 PERKINS RD SUITE 170			Amount of Each Disbursement this Period 1146.05	
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SB17.6340	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. CHELSEA BONNECAZE			Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 7520 PERKINS RD SUITE 170			Amount of Each Disbursement this Period 130.16	
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SB17.6344	
Purpose of Disbursement Reimbursement- Meal Expenses		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Candidate Command			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 1420 NW Vivion, Suite 113			Amount of Each Disbursement this Period 4797.00	
City Kansas City	State MO	Zip Code 64118	Transaction ID : SB17.6338	
Purpose of Disbursement Phone Bank		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	6073.21
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 67 OF 84		
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital Promotions		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 249 N Keswick Ave		Amount of Each Disbursement this Period 6940.00
City Glenside	State PA	
Zip Code 19038	Purpose of Disbursement Direct Marketing	Transaction ID : SB17.6198
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. Capital Promotions		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 249 N Keswick Ave		Amount of Each Disbursement this Period 834.00
City Glenside	State PA	
Zip Code 19038	Purpose of Disbursement Direct Marketing	Transaction ID : SB17.6199
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) c. Joe Coniglio		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address PO Box 453		Amount of Each Disbursement this Period 800.00
City Denham Springs	State LA	
Zip Code 70727	Purpose of Disbursement Signs	Transaction ID : SB17.6312
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8574.00
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 68 OF 84		
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CRYSTAL CLEAR IMAGING

Mailing Address

City State Zip Code

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 02 / 2014

Amount of Each Disbursement this Period
1360.08

Transaction ID : SB17.6287

Category/Type

Full Name (Last, First, Middle Initial)
B. Cybersource

Mailing Address

City State Zip Code

Purpose of Disbursement
Credit Card Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 03 / 2014

Amount of Each Disbursement this Period
22.60

Transaction ID : SB17.6288

Category/Type

Full Name (Last, First, Middle Initial)
c. Denham Springs High School

Mailing Address

City State Zip Code

Purpose of Disbursement
Direct Marketing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 07 / 2014

Amount of Each Disbursement this Period
850.00

Transaction ID : SB17.6218

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 2232.68

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 69 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Denham Springs High School		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6253
City	State Zip Code	
Purpose of Disbursement Direct Marketing	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. Department of Revenue and Taxation		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address		Amount of Each Disbursement this Period 279.00 Transaction ID : SB17.6204
City	State Zip Code	
Purpose of Disbursement Taxes	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) C. Eye Wander Photo		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address		Amount of Each Disbursement this Period 425.10 Transaction ID : SB17.6310
City	State Zip Code	
Purpose of Disbursement Photography Services	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	904.10
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 71 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Geaux Logo Promotions		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 5800 One Perkins Place, Suite 7B		Amount of Each Disbursement this Period 432.65 Transaction ID : SB17.6215
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Direct Marketing	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. Geaux Logo Promotions		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 5800 One Perkins Place, Suite 7B		Amount of Each Disbursement this Period 288.10 Transaction ID : SB17.6216
City Baton Rouge	State LA	
Zip Code 70808	Purpose of Disbursement Direct Marketing	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) c. Lava Cantina		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 10001 Perkins Rowe		Amount of Each Disbursement this Period 158.00 Transaction ID : SB17.6293
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	878.75
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 72 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Livingston Parish Republican Women		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.6225
City	State Zip Code	
Purpose of Disbursement Donation	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. Louisiana Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.6257
City	State Zip Code	
Purpose of Disbursement Qualifying Fee	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) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 7074 Siegen Lane		Amount of Each Disbursement this Period 179.83 Transaction ID : SB17.6280
City	State Zip Code	
Baton Rouge	LA 70809	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1379.83
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 73 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 7074 Siegen Lane		Amount of Each Disbursement this Period 164.68
City Baton Rouge	State LA	
Zip Code 70809	Purpose of Disbursement Office Supplies	Transaction ID : SB17.6300
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Henry Olinde		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 8562 Jefferson Highway, Suite B		Amount of Each Disbursement this Period 783.67
City Baton Rouge	State LA	
Zip Code 70809	Purpose of Disbursement In-kind - Fundraiser	Transaction ID : SB17.6181
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael E. Olinde		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 4970 Bluebonnet Boulevard, Suite B		Amount of Each Disbursement this Period 783.68
City Baton Rouge	State LA	
Zip Code 70809	Purpose of Disbursement In-kind - Fundraiser	Transaction ID : SB17.6178
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1732.03
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 74 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dana Parks		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address		Amount of Each Disbursement this Period 610.00 Transaction ID : SB17.6242
City	State Zip Code	
Purpose of Disbursement Consultant	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. Pelican State Friends of NRA		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.6318
City	State Zip Code	
Purpose of Disbursement Donation	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Postlethwaite & Netterville		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 8550 United Plaza Blvd Ste 1001		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.6306
City	State Zip Code	
Baton Rouge	LA 70809	
Purpose of Disbursement Accounting Services	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3560.00
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 75 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Proforma		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address		Amount of Each Disbursement this Period 880.18 Transaction ID : SB17.6244
City	State Zip Code	
Purpose of Disbursement Direct Marketing	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. Proforma		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address		Amount of Each Disbursement this Period 504.94 Transaction ID : SB17.6245
City	State Zip Code	
Purpose of Disbursement Direct Marketing	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) C. QUILL CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address		Amount of Each Disbursement this Period 155.86 Transaction ID : SB17.6262
City	State Zip Code	
Purpose of Disbursement Office Supplies	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:		

SUBTOTAL of Disbursements This Page (optional).....	1540.98
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 76 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. QUILL CORPORATION		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address		Amount of Each Disbursement this Period 122.04 Transaction ID : SB17.6263
City	State Zip Code	
Purpose of Disbursement Office Supplies	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. Raising Cane's		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address		Amount of Each Disbursement this Period 472.06 Transaction ID : SB17.6291
City	State Zip Code	
Purpose of Disbursement Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Raising Cane's		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address		Amount of Each Disbursement this Period 30.43 Transaction ID : SB17.6311
City	State Zip Code	
Purpose of Disbursement Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	624.53
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 77 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Republican Party of Louisiana		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.6259
City	State Zip Code	
Purpose of Disbursement Donation	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. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.6201
City	State Zip Code	
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) C. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.6251
City	State Zip Code	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5300.00
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 78 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address		Amount of Each Disbursement this Period 172.20
City State Zip Code		
Purpose of Disbursement Reimbursement- Meal Expenses	Category/ Type	Transaction ID : SB17.6252
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. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address		Amount of Each Disbursement this Period 2500.00
City State Zip Code		
Purpose of Disbursement Payroll	Category/ Type	Transaction ID : SB17.6270
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 168.00
City State Zip Code		
Purpose of Disbursement Reimbursement- Meal Expenses	Category/ Type	Transaction ID : SB17.6295
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2840.20
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 79 OF 84	
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brent Robertson		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.6304
City	State Zip Code	
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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Roto Rooter		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 395.00 Transaction ID : SB17.6212
City	State Zip Code	
Purpose of Disbursement Utilities	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" 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) c. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 10300 Coursey Boulevard		Amount of Each Disbursement this Period 359.44 Transaction ID : SB17.6331
City	State Zip Code	
Baton Rouge LA 70816		
Purpose of Disbursement Signs	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" 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:		

SUBTOTAL of Disbursements This Page (optional).....	3254.44
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 80 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Home Depot		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 10300 Coursey Boulevard		Amount of Each Disbursement this Period 9.67 Transaction ID : SB17.6332
City Baton Rouge	State LA	
Zip Code 70816	Purpose of Disbursement Signs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE LOBBY CAFE		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 10300 Coursey Boulevard		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.6328
City Baton Rouge	State LA	
Zip Code 70816	Purpose of Disbursement Food/Beverage	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) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address		Amount of Each Disbursement this Period 2537.73 Transaction ID : SB17.6214
City	State	
Zip Code	Purpose of Disbursement Taxes	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:	

SUBTOTAL of Disbursements This Page (optional).....	2997.40
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 81 OF 84	
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address		Amount of Each Disbursement this Period 44.82
City	State Zip Code	
Purpose of Disbursement Food/Beverage	Category/Type	Transaction ID : SB17.6294
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WAL-MART		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address		Amount of Each Disbursement this Period 52.29
City	State Zip Code	
Purpose of Disbursement Food/Beverage	Category/Type	Transaction ID : SB17.6339
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 1253.37
City	State Zip Code Baton Rouge LA 70810	
Purpose of Disbursement Payroll	Category/Type	Transaction ID : SB17.6324
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:		

SUBTOTAL of Disbursements This Page (optional).....	1350.48
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 82 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 1253.37
City Baton Rouge	State LA	
Purpose of Disbursement Payroll	Category/ Type	
Candidate Name		Transaction ID : SB17.6329
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. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 283.95
City Baton Rouge	State LA	
Purpose of Disbursement Reimbursement- Mileage	Category/ Type	
Candidate Name		Transaction ID : SB17.6347
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) C. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 1253.37
City Baton Rouge	State LA	
Purpose of Disbursement Payroll	Category/ Type	
Candidate Name		Transaction ID : SB17.6333
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	2790.69
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 83 OF 84			
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 188.34
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Reimbursement- Mileage	Transaction ID : SB17.6334
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 32.00
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Reimbursement- Mileage	Transaction ID : SB17.6335
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 115.92
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Reimbursement- Mileage	Transaction ID : SB17.6348
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	336.26
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 84 OF 84	
	<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)
CLAITOR FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 1253.37
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Payroll	Transaction ID : SB17.6341
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cody Wells		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 15949 Highland Road		Amount of Each Disbursement this Period 82.88
City Baton Rouge	State LA	
Zip Code 70810	Purpose of Disbursement Reimbursement- Mileage	Transaction ID : SB17.6346
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1336.25
TOTAL This Period (last page this line number only).....	65961.74