

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

TIM BURNS FOR CONGRESS

ADDRESS (number and street) 1 Sanctuary Boulevard

Check if different than previously reported. (ACC)

Suite 306

Mandeville

LA

70471

2. **FEC IDENTIFICATION NUMBER** C00440818 **CITY** **STATE** LA **ZIP CODE** 70471 **STATE** LA **DISTRICT** 01

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on

in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on

in the State of

5. Covering Period 07 01 2008 through 09 30 2008

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 Mr. Thomas J. Eppling

Signature of Treasurer Electronically Filed by Mr. Thomas J. Eppling

Date 12 16 2008

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

TIM BURNS FOR CONGRESS

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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)).....	23451.00	376474.41
(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)).....	23451.00	376474.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	24312.10	488545.43
(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)).....	24312.10	488545.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9828.98	
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).....	121900.00	

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
TIM BURNS FOR CONGRESS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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).....

20876.00

346498.41

(ii) Unitemized.....

1325.00

14426.00

(iii) TOTAL of contributions

22201.00

360924.41

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

1250.00

15550.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

23451.00

376474.41

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

124800.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

124800.00

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)..... ▶

23451.00

501274.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24312.10	488545.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	2000.00	2900.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	2000.00	2900.00
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) ▶	26312.10	491445.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12690.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	23451.00
25. SUBTOTAL (add Line 23 and Line 24).....	36141.08
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26312.10
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9828.98

**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 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)
TIM BURNS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) David W. Alligood	Date of Receipt MM / DD / YYYY 07 / 15 / 2008
	Mailing Address 11606 S. Fork Ave	Transaction ID: SA11AI.5662
	City State Zip Code Baton Rouge LA 70810	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer owner Occupation Insurance agent	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 1000.00

B.	Full Name (Last, First, Middle Initial) John Ammerman	Date of Receipt MM / DD / YYYY 07 / 15 / 2008
	Mailing Address 209 Governors Ct.	Transaction ID: SA11AI.5660
	City State Zip Code Mandeville LA 70448	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	joint contrib. with Karen Ammerman <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Omni Occupation Banker	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00

C.	Full Name (Last, First, Middle Initial) Karen Ammerman	Date of Receipt MM / DD / YYYY 07 / 15 / 2008
	Mailing Address 209 Governors Ct.	Transaction ID: SA11AI.5661
	City State Zip Code Mandeville LA 70448	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	joint contrib. with John Ammerman <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Omni Occupation banker	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 250.00

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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: PAGE 6 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeff M. Anastasio

Mailing Address 413 Turnwood Drive

City State Zip Code
Covington LA 70433

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

Name of Employer self Occupation optometrist

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 750.00

Date of Receipt 07 / 15 / 2008
Transaction ID: SA11AI.5664
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Associated Branch Pilots Association

Mailing Address 3813 N. Causeway Blvd.
Ste. 100

City State Zip Code
Metairie LA 70002

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 6900.00

Date of Receipt 07 / 15 / 2008
Transaction ID: SA11AI.5669
 Amount of Each Receipt this Period 2300.00

multi-candidate committee

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elton G. Beebe

Mailing Address POB 6015

City State Zip Code
Ridgeland MS 39158

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

Name of Employer owner Occupation marine industry

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 2000.00

Date of Receipt 07 / 02 / 2008
Transaction ID: SA11AI.5647
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **3550.00**

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: PAGE 7 / 26
(check only one)

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

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Karen Brannan</p> <p>Mailing Address 330 North New Hampshire St</p> <p>City State Zip Code Covington LA 70433</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation self attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 16 / 2008</p> <p>Transaction ID: SA11AI.5674</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Randall Brown</p> <p>Mailing Address 553 Beau Chene Drive</p> <p>City State Zip Code Mandeville LA 70471</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation self surveyor</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p style="text-align: right;">250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2008</p> <p>Transaction ID: SA11AI.5699</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Philip Cossich</p> <p>Mailing Address 12154 Hwy. 23</p> <p>City State Zip Code Belle Chasse LA 70037</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation self attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p style="text-align: right;">2767.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2008</p> <p>Transaction ID: SA11AI.5714</p> <p>Amount of Each Receipt this Period 767.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1267.00
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: PAGE 8 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pam Egan
Mailing Address POB 8772
City Metairie State LA Zip Code 70011
FEC ID number of contributing federal political committee. **C**
Name of Employer Egan Nursing Services Occupation owner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Runoff 1000.00
Date of Receipt 07 / 16 / 2008
Transaction ID: SA11AI.5680
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Benjamin Erdely
Mailing Address 5 Cathy Drive
City Luling State LA Zip Code 70070
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation sales
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Runoff 2150.00
Date of Receipt 08 / 05 / 2008
Transaction ID: SA11AI.5719
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles Foy
Mailing Address POB 10
City Madisonville State LA Zip Code 70447-0010
FEC ID number of contributing federal political committee. **C**
Name of Employer Dr. Charles Foy Occupation dentist
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Runoff 1750.00
Date of Receipt 07 / 17 / 2008
Transaction ID: SA11AI.5682
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00
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: PAGE 9 / 26
(check only one)

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

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Wanda Freeman</p> <p>Mailing Address 8555 United Plaza Blvd.</p> <p>City State Zip Code Baton Rouge LA 70810</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Jones Walker govt. relations</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 07 / 18 / 2008</p> <p>Transaction ID: SA11AI.5708</p> <p>Amount of Each Receipt this Period 250.00</p> <p>joint contrib. with Kim Robinson <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) James D. Garvey</p> <p>Mailing Address 3501 N. Causeway</p> <p>City State Zip Code Metairie LA 70002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hailey, McNamara attorney</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 07 / 17 / 2008</p> <p>Transaction ID: SA11AI.5685</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Deborah D. Harkins</p> <p>Mailing Address 643 Magazine St</p> <p>City State Zip Code New Orleans LA 70130</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation McGlinchey Stafford attorney</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 07 / 16 / 2008</p> <p>Transaction ID: SA11AI.5676</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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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: PAGE 10 / 26
(check only one)

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

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Jim Harris

Mailing Address 10721 Hidden Lake Court

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Harris, DeVille Occupation public relations

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 3300.00

Date of Receipt 08 / 14 / 2008
Transaction ID: SA11AI.5723

Amount of Each Receipt this Period 2300.00

allocated to runoff election
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Tim Johnson

Mailing Address 9270 Siegen Lane

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Advantous Consulting Occupation govt relations

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt 07 / 02 / 2008
Transaction ID: SA11AI.5648

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Ron Kilcrease

Mailing Address 21489 Koop Drive

City State Zip Code
Mandeville LA 70448

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

Name of Employer Rek Architects Occupation architect

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt 07 / 16 / 2008
Transaction ID: SA11AI.5678

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **2800.00**

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 11 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

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

Mailing Address 3321 Pomeroy Road

City Downers Grove State IL Zip Code 60515

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

Name of Employer self Occupation marine industry

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 1275.00

Date of Receipt 07 / 09 / 2008

Transaction ID: SA11AI.5652

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Royal B. Kraft, Sr.

Mailing Address 21258 Wallace King Road

City Bush State LA Zip Code 70431

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

Name of Employer Kraft Farm Occupation retail seafood distrib.

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 350.00

Date of Receipt 07 / 11 / 2008

Transaction ID: SA11AI.5656

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Ronald J. Krajewski

Mailing Address 123 Park Avenue

City Harahan State LA Zip Code 70123

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

Name of Employer NFL Players Occupation representative

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt 07 / 17 / 2008

Transaction ID: SA11AI.5683

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **600.00**

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: PAGE 12 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CJ Ladner
Mailing Address 137 E. Ruelle St
City Mandeville State LA Zip Code 70471
FEC ID number of contributing federal political committee. **C**
Name of Employer CJ Ladner Insurance Occupation Agent
Receipt For: 2008
 Primary General
 Other (specify) ▼
Runoff Election Cycle-to-Date ▼ 250.00
Date of Receipt 07 / 07 / 2008
Transaction ID: SA11AI.5650
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael Mayer
Mailing Address 33222 Rivergate Circle
City Springfield State LA Zip Code 70462
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation marine
Receipt For: 2008
 Primary General
 Other (specify) ▼
Runoff Election Cycle-to-Date ▼ 1000.00
Date of Receipt 07 / 18 / 2008
Transaction ID: SA11AI.5693
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Malcolm Meyer
Mailing Address 701 Poydras St.
City Metairie State LA Zip Code 70005
FEC ID number of contributing federal political committee. **C**
Name of Employer Adams & Reesé, LLP Occupation attorney
Receipt For: 2008
 Primary General
 Other (specify) ▼
Runoff Election Cycle-to-Date ▼ 750.00
Date of Receipt 07 / 15 / 2008
Transaction ID: SA11AI.5658
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
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: PAGE 13 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robin R. Mingo

Mailing Address POB 314

City State Zip Code
Covington LA 70434

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

Name of Employer self Occupation
real estate developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff 2550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2008

Transaction ID: SA11AI.5659

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Parsiola

Mailing Address POB 400

City State Zip Code
Belle Chasse LA 70037

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

Name of Employer Cossich, Sumich et al Occupation
attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff 767.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 05 / 2008

Transaction ID: SA11AI.5717

Amount of Each Receipt this Period
767.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amanda Phillips

Mailing Address 1038 Whitetail Drive

City State Zip Code
Mandeville LA 70448

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

Name of Employer self Occupation
insurance

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Runoff 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 15 / 2008

Transaction ID: SA11AI.5667

Amount of Each Receipt this Period
500.00

joint contrib. with Jimmy Phillips
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1517.00**

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: PAGE 14 / 26
(check only one)

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

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Jimmy Phillips

Mailing Address 1038 Whitetail Drive

City State Zip Code
Mandeville LA 70448

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

Name of Employer self Occupation Insurance agent

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼ Runoff

Date of Receipt
MM / DD / YYYY
07 / 15 / 2008

Transaction ID: SA11AI.5665

Amount of Each Receipt this Period
500.00

joint contrib. with Amanda Phillips
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Dale Reveille

Mailing Address 743 Robert Blvd.

City State Zip Code
Slidell LA 70458

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

Name of Employer owner Occupation Shipping Firm

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼ Runoff

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.5703

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Kim Robinson

Mailing Address 8555 United Plaza Blvd

City State Zip Code
Baton Rouge LA 70810

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

Name of Employer Jones Walker Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼ Runoff

Date of Receipt
MM / DD / YYYY
07 / 18 / 2008

Transaction ID: SA11AI.5705

Amount of Each Receipt this Period
250.00

joint contrib. with Wanda Freeman
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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)	PAGE 15 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

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

Mailing Address POB 681

City Mandeville State LA Zip Code 70470

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

Name of Employer Robert A. Schroeder, Inc. Occupation landman

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 1250.00

Date of Receipt 07 / 02 / 2008

Transaction ID: SA11AI.5646

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cliff Sivend

Mailing Address 28603 Krentel Rd

City Lacombe State LA Zip Code 70445

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

Name of Employer self Occupation construction

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt 07 / 01 / 2008

Transaction ID: SA11AI.5638

Amount of Each Receipt this Period 250.00

joint contribution with Wanda Sivend
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Wanda Sivend

Mailing Address 28603 Krentel Rd

City Lacombe State LA Zip Code 70445

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

Name of Employer self Occupation construction

Receipt For: 2008
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 250.00

Date of Receipt 07 / 01 / 2008

Transaction ID: SA11AI.5640

Amount of Each Receipt this Period 250.00

joint contribution with Cliff Sivend
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **750.00**

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 17 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Randy Waesche	Date of Receipt MM / DD / YYYY 07 / 11 / 2008
	Mailing Address 107 North Lake Drive	Transaction ID: SA11AI.5653
	City State Zip Code Mandeville LA 70448	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	joint contrib. with Bonita Waesche <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Family Wealth Management, LLC	Occupation financial planning	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 1125.00	

B.	Full Name (Last, First, Middle Initial) Lavelle Watts	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address POB 8797	Transaction ID: SA11AI.5701
	City State Zip Code Mandeville LA 70470	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self	Occupation CPA	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) Johnny White	Date of Receipt MM / DD / YYYY 07 / 14 / 2008
	Mailing Address 530 16th Street	Transaction ID: SA11AI.5657
	City State Zip Code Gretna LA 70053	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	allocated to runoff election <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer C&W Air Repair	Occupation owner	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 2300.00	

SUBTOTAL of Receipts This Page (optional)	925.00
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: PAGE 18 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) Johnny White		Date of Receipt MM / DD / YYYY 07 / 14 / 2008
Mailing Address 530 16th Street		Transaction ID: SA11AI.5736
City Gretna	State LA	Zip Code 70053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer C&W Air Repair	Occupation owner	allocated to special-primary election <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	20876.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 26			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRESCENT RIVER PORT PILOTS ASSOCIATION FEDERAL POLITICAL ACTION COMMITTEE/CRPPA Date of Receipt

Mailing Address **8712 HWY 23** M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

City State Zip Code
BELLE CHASSE LA 70037

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

Transaction ID: **SA11C.5721**

Amount of Each Receipt this Period
1000.00

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA BETTER GOVERNMENT COM Date of Receipt

Mailing Address **950 F Street NW Suite 300** M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 8

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00021972**

Transaction ID: **SA11C.5724**

Amount of Each Receipt this Period
250.00

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	1250.00

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Amite Sign Company	Transaction ID: SB17.5625 Date of Disbursement
	Mailing Address 12687 Virginia St.	<input type="text" value="07"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Amite State LA Zip Code 70422	Amount of Each Disbursement this Period
	Purpose of Disbursement signs	<input type="text" value="875.00"/>
	Candidate Name TIM BURNS FOR CONGRESS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Category/Type <input type="text" value="006"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

B.	Full Name (Last, First, Middle Initial) Amite Sign Company	Transaction ID: SB17.5626 Date of Disbursement
	Mailing Address 12687 Virginia St.	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Amite State LA Zip Code 70422	Amount of Each Disbursement this Period
	Purpose of Disbursement signs	<input type="text" value="2610.10"/>
	Candidate Name TIM BURNS FOR CONGRESS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Category/Type <input type="text" value="006"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

C.	Full Name (Last, First, Middle Initial) Craig Bloodworth	Transaction ID: SB17.5629 Date of Disbursement
	Mailing Address 1012 Esplanade Ave	<input type="text" value="08"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City New Orleans State LA Zip Code 70130	Amount of Each Disbursement this Period
	Purpose of Disbursement graphic artist fees	<input type="text" value="12000.00"/>
	Candidate Name TIM BURNS FOR CONGRESS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Category/Type <input type="text" value="006"/>
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15485.10"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Southcoast Segway

Transaction ID: SB17.5623
Date of Disbursement

Mailing Address 271 W. 9th Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

City State Zip Code
Foley AL 36535

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
segway rental
Candidate Name
TIM BURNS FOR CONGRESS

002
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: LA District: 01
Disbursement For: 2008
 Primary General
 Other (specify) ▼
Runoff

B.

Full Name (Last, First, Middle Initial)
Southcoast Segway

Transaction ID: SB17.5627
Date of Disbursement

Mailing Address 271 W. 9th Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	8

City State Zip Code
Foley AL 36535

Amount of Each Disbursement this Period

1235.00

Purpose of Disbursement
segway rental
Candidate Name
TIM BURNS FOR CONGRESS

006
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: LA District: 01
Disbursement For: 2008
 Primary General
 Other (specify) ▼
Runoff

C.

Full Name (Last, First, Middle Initial)
Washington Political Group

Transaction ID: SB17.5628
Date of Disbursement

Mailing Address 4155 Lfawrenceville Hwy.

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	8

City State Zip Code
Lilburn GA 30047

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
polling and robo calls
Candidate Name
TIM BURNS FOR CONGRESS

005
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: LA District: 01
Disbursement For: 2008
 Primary General
 Other (specify) ▼
Runoff

SUBTOTAL of Disbursements This Page (optional)

3235.00

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Washington Political Group

Transaction ID: SB17.5632
Date of Disbursement

Mailing Address 4155 Lfawrenceville Hwy.

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	0	8

City Lilburn State GA Zip Code 30047

Amount of Each Disbursement this Period

4500.00

Purpose of Disbursement
polls and robo calls

005
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
TIM BURNS FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 01

Runoff

B.

Full Name (Last, First, Middle Initial)
Washington Political Group

Transaction ID: SB17.5633
Date of Disbursement

Mailing Address 4155 Lfawrenceville Hwy.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

City Lilburn State GA Zip Code 30047

Amount of Each Disbursement this Period

1092.00

Purpose of Disbursement
polling and robo calls

005
Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name
TIM BURNS FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 01

Runoff

SUBTOTAL of Disbursements This Page (optional)

5592.00

TOTAL This Period (last page this line number only)

24312.10

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Hancock Bank

Transaction ID: SB19A.5636
Date of Disbursement

Mailing Address 2929 Hwy. 190

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	0	8

City Mandeville State LA Zip Code 70471

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
loan repayment

009
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
TIM BURNS FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 01

B.

Full Name (Last, First, Middle Initial)
Hancock Bank

Transaction ID: SB19A.5637
Date of Disbursement

Mailing Address 2929 Hwy. 190

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	0	8

City Mandeville State LA Zip Code 70471

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
loan repayment

009
Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name
TIM BURNS FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 01

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

2000.00

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

Transaction ID: SC/10.4766

LOAN SOURCE Full Name (Last, First, Middle Initial) TIMOTHY G BURNS	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff
Mailing Address 1501 MADISON STREET	
City MANDEVILLE State LA ZIP Code 70448	

Original Amount of Loan 49900.00	Cumulative Payment To Date 2900.00	Balance Outstanding at Close of This Period 47000.00
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TERMS

Date Incurred MM DD YY YY 03 04 2008	Date Due 12/31/08	Interest Rate 8.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	47000.00
TOTALS This Period (last page in this line only)	▶	.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

Transaction ID: SC/10.4969

LOAN SOURCE Full Name (Last, First, Middle Initial)
TIMOTHY G BURNS

Election:
 Primary
 General
 Other (specify) ▼
Runoff

Mailing Address 1501 MADISON STREET

City MANDEVILLE State LA ZIP Code 70448

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
49900.00	0.00	49900.00

TERMS

Date Incurred: MM DD YY YY Date Due: Interest Rate: Secured:

03 24 2008 12/31/08 8.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	49900.00
TOTALS This Period (last page in this line only)	▶	.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
TIM BURNS FOR CONGRESS

Transaction ID: SC/10.5513

LOAN SOURCE Full Name (Last, First, Middle Initial) TIMOTHY G BURNS - [PERSONAL FUNDS]		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff
Mailing Address 1501 MADISON STREET		
City MANDEVILLE	State LA	ZIP Code 70448

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 04 23 2008	12/31/2008	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	25000.00
TOTALS This Period (last page in this line only)	▶	121900.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.