

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than 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

ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

ADDRESS (number and street)

P.O. BOX 98000

Check if different than previously reported. (ACC)

LAFAYETTE

LA

70509

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIPCODE

C00335570

3. IS THIS REPORT

x

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 Quarterly Report(YE)

x July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

01

01

2005

through

06

30

2005

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

TIMOTHY BURKE

Signature of Treasurer

Electronically Filed by TIMOTHY BURKE

Date

07

11

2005

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 3X  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Report Covering the Period: From: <sup>M</sup>01 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2005

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2005		1224.48
(b) Cash on Hand at Beginning of Reporting Period .....	1224.48	
(c) Total Receipts (from Line 19) .....	27397.90	27397.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	28622.38	28622.38
<hr/>		
7. Total Disbursements (from Line 31) .....	28408.80	28408.80
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	213.58	213.58
<hr/>		
9. Debts and Obligations owed <b>TO</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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Page 3

Write or Type Committee Name

ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Report Covering the Period: From: <sup>M</sup>01 <sup>-</sup>01 <sup>-</sup>2005 To: <sup>M</sup>06 <sup>-</sup>30 <sup>-</sup>2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	20812.49	20812.49
(ii) Unitemized .....	6585.41	6585.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	27397.90	27397.90
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	27397.90	27397.90
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27397.90	27397.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27397.90	27397.90

**DETAILED SUMMARY PAGE**

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28408.80	28408.80
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28408.80	28408.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	28408.80	28408.80

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	27397.90	27397.90
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27397.90	27397.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6/10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. TERRY ARGENEALX</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 8208 ASHFORD DR		Transaction ID: SA11A1.4261
City ALEXANDRIA	State LA	Zip Code 71303
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 894.99
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATIONS	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 894.99	

Full Name (Last, First, Middle Initial) <b>B. ERROLL BABINEAUX</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 27 OAK PLACE		Transaction ID: SA11A1.4262
City NEW IBERIA	State LA	Zip Code 70560
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 898.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATIONS	\$96.15 PAYROLL DEDUCTION BI-WEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 898.60	

Full Name (Last, First, Middle Initial) <b>C. RAY BIAS</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 228 S. FIELDSPAN RD		Transaction ID: SA11A1.4263
City SCOTT	State LA	Zip Code 70583
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 898.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation GOVERNMENTAL RELATIONS MANAGER	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 898.60	

SUBTOTAL of Receipts This Page (optional) .....	<b>2698.19</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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(check only one)  
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13 14 15 16 17

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NAME OF COMMITTEE (In Full)  
**ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY BRUCH</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address <b>15 TRACE LOOP</b>		Transaction ID: SA11A1.4264
City	State	Zip Code
<b>MANDEVILLE</b>	<b>LA</b>	<b>70448</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer <b>ACADIAN AMBULANCE SERVICE</b>	Occupation <b>EDUCATION COORDINATOR</b>	<b>\$96.15 PAYROLL DEDUCTION BIWEEKLY</b>
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY BURKE</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address <b>221 VEROT SCHOOL RD #213</b>		Transaction ID: SA11A1.4265
City	State	Zip Code
<b>LAFAYETTE</b>	<b>LA</b>	<b>70501</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer <b>ACADIAN AMBULANCE SERVICE</b>	Occupation <b>VICE PRESIDENT - FINANCE</b>	<b>\$96.15 PAYROLL DEDUCTION BIWEEKLY</b>
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>C. GLENN COMEAUX</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address <b>119 WESTFIELD DR</b>		Transaction ID: SA11A1.4266
City	State	Zip Code
<b>LAFAYETTE</b>	<b>LA</b>	<b>70503</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer <b>ACADIAN AMBULANCE SERVICE</b>	Occupation <b>SR. VICE PRESIDENT</b>	<b>\$96.15 PAYROLL DEDUCTION BIWEEKLY</b>
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2689.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8/10

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. DANIEL DOMINGUE</b>		Date of Receipt M / D / Y 02 / 03 / 2005	
Mailing Address 105 LLANSFAIR DRIVE		Transaction ID: SA11A1.4267	
City LAFAYETTE	State LA	Zip Code 70503	Amount of Each Receipt this Period 192.30
FEC ID number of contributing federal political committee. <b>C</b>		\$96.15 PAYROLL DEDUCTION BIWEEKLY	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation CHIEF ADMINISTRATIVE OFFICER		
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 192.30		
Full Name (Last, First, Middle Initial) <b>B. DON ELKINS</b>		Date of Receipt M / D / Y 06 / 24 / 2005	
Mailing Address 100 RENEL RD		Transaction ID: SA11A1.4268	
City BREAUX BRIDGE	State LA	Zip Code 70517	Amount of Each Receipt this Period 898.60
FEC ID number of contributing federal political committee. <b>C</b>		\$96.15 PAYROLL DEDUCTION BIWEEKLY	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation MANAGER		
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 898.60		
Full Name (Last, First, Middle Initial) <b>C. DIANE GROH</b>		Date of Receipt M / D / Y 06 / 24 / 2005	
Mailing Address 201 ACADEMY RD		Transaction ID: SA11A1.4269	
City LAFAYETTE	State LA	Zip Code 70503	Amount of Each Receipt this Period 898.60
FEC ID number of contributing federal political committee. <b>C</b>		\$96.15 PAYROLL DEDUCTION BIWEEKLY	
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - INSURANCE		
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 898.60		

SUBTOTAL of Receipts This Page (optional) ..... ► **1985.50**

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



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 10

(check only one)

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. CLAY HENRY</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 310 WALLINGSFORD		Transaction ID: SA11A1.4270
City	State	Zip Code
YOUNGSVILLE	LA	70502
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATIONS	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>B. ROSS JUDICE</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 111 GIRARD PK. DRIVE #25		Transaction ID: SA11A1.4271
City	State	Zip Code
LAFAYETTE	LA	70503
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation CHIEF MEDICAL OFFICER	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>C. DAVID KELLY</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 2080 CHERRYDALE DRIVE		Transaction ID: SA11A1.4272
City	State	Zip Code
BATON ROUGE	LA	70808
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation CHIEF FINANCIAL OFFICER	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2689.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. STEVEN KLIPER</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 408 IDLEWILD DR		Transaction ID: SA11A1.4273
City HOUMA	State LA	Zip Code 70364
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATION	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>B. DANNY LENNIE</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 12718 E. SHEATON		Transaction ID: SA11A1.4274
City BATON ROUGE	State LA	Zip Code 70815
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATION	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>C. JOSEPH LIGHTFOOT</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 215 CRESTHILL DRIVE		Transaction ID: SA11A1.4275
City YOUNGSVILLE	State LA	Zip Code 70562
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - HUMAN RESOURCES	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>2689.80</b>
TOTAL This Period (last page this line number only) .....	

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

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FOR LINE NUMBER: PAGE 11 / 19  
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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. ED MURY</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 3500 E SIMCOE #71		Transaction ID: SA11A1.4278
City LAFAYETTE	State LA	Zip Code 70501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation PRESIDENT - AIS	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>B. TYRON PICARD</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 2005 W. ST. MARY		Transaction ID: SA11A1.4277
City LAFAYETTE	State LA	Zip Code 70506
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation EXECUTIVE VICE PRESIDENT	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>C. DAVID PIERCE</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 327 WORTH AVE		Transaction ID: SA11A1.4278
City LAFAYETTE	State LA	Zip Code 70508
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation PRESIDENT/COD	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

SUBTOTAL of Receipts This Page (optional) .....	<b>2689.80</b>
TOTAL This Period (last page this line number only) .....	

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

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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. JAY PIERRET</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address P.O. BOX 2806		Transaction ID: SA11A1.4279
City <b>LAFAYETTE</b>	State <b>LA</b>	Zip Code <b>70502</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - BUSINESS DEVELOPMENT	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>B. EARL ROMERO, Jr.</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 104 VAN DYKE CT		Transaction ID: SA11A1.4280
City <b>LAFAYETTE</b>	State <b>LA</b>	Zip Code <b>70502</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - OPERATIONS	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

Full Name (Last, First, Middle Initial) <b>C. W/ KEITH SIMON</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 485 BROUSSARD ST		Transaction ID: SA11A1.4287
City <b>BREAUX BRIDGE</b>	State <b>LA</b>	Zip Code <b>70517</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>896.60</b>
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - PUBLIC RELATIONS	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>896.60</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2689.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial) <b>A. WILLIAM VIDACOVICH, Jr.</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 116 CANADA ST		Transaction ID: SA11A1.4288
City	State	Zip Code
LAFAYETTE	LA	70506
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation VICE PRESIDENT - MNT.	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>B. JOHN ZUSCHLAG</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 110 RUE PAPILLON		Transaction ID: SA11A1.4288
City	State	Zip Code
BROUSSARD	LA	70518
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation SR. VICE PRESIDENT	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

Full Name (Last, First, Middle Initial) <b>C. RICHARD ZUSCHLAG</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 108 ASTORIA LOOP		Transaction ID: SA11A1.4290
City	State	Zip Code
LAFAYETTE	LA	70508
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 896.60
Name of Employer ACADIAN AMBULANCE SERVICE	Occupation CHAIRMAN/CEO	\$96.15 PAYROLL DEDUCTION BIWEEKLY
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 896.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2689.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>20812.49</b>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

A. Full Name (Last, First, Middle Initial)  
**RODNEY ALEXANDER**

Mailing Address **P.O. BOX 368**

City **QUITMAN** State **LA** Zip Code **71268**

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: **LA** District: **D5**

Disbursement For: **2008**  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: **SB23.4233**  
Date of Disbursement  
**03 / 18 / 2005**

Amount of Each Disbursement this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**RODNEY ALEXANDER**

Mailing Address **P.O. BOX 368**

City **QUITMAN** State **LA** Zip Code **71268**

Purpose of Disbursement

Candidate Name  
**RODNEY ALEXANDER**

Office Sought:  House  Senate  President  
State: **LA** District: **D5**

Disbursement For: **2008**  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: **SB23.4247**  
Date of Disbursement  
**05 / 27 / 2005**

Amount of Each Disbursement this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**JEFF BINGAMAN**

Mailing Address **PO BOX 16210**

City **ALBUQUERQUE** State **NM** Zip Code **87191**

Purpose of Disbursement

Candidate Name  
**JEFF BINGAMAN**

Office Sought:  House  Senate  President  
State: **NM** District: **00**

Disbursement For: **2008**  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: **SB23.4243**  
Date of Disbursement  
**05 / 13 / 2005**

Amount of Each Disbursement this Period  
**1000.00**

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)  
**A. COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE**

Mailing Address P.O. Box 65314

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.4218  
Date of Disbursement  
02 / 11 / 2005

Amount of Each Disbursement this Period  
5000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. EMPLOYEE OWNERS FOUNDATION**

Mailing Address 1726 M STREET, NW, SUITE 501

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.4228  
Date of Disbursement  
02 / 22 / 2005

Amount of Each Disbursement this Period  
500.00

012  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. ESDP ASSOCIATION PAC**

Mailing Address 1726 M STREET, NW SUITE 501

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.4220  
Date of Disbursement  
02 / 21 / 2005

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ▶ **6500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)

**A. GLACIER PAC**

Mailing Address 818 Connecticut Ave. NW  
Suite 1100

City Washington State DC Zip Code 20006

Purpose of Disbursement

Candidate Name  
GLACIER PAC

011  
Category/  
Type

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

State: District

Transaction ID: SB23.4249

Date of Disbursement

05 / 24 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. WILLIAM JENNINGS JEFFERSON**

Mailing Address 1922 MARENGO STREET

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement

Candidate Name  
WILLIAM JENNINGS JEFFERSON

011  
Category/  
Type

Office Sought:  House Senate President  
Disbursement For: 2006  
 Primary General Other (specify) ▼

State: LA District 02

Transaction ID: SB23.4245

Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. BOBBY JINDAL**

Mailing Address PO BOX 862B

City METAIRIE State LA Zip Code 70011

Purpose of Disbursement

Candidate Name  
BOBBY JINDAL

Category/  
Type

Office Sought:  House Senate President  
Disbursement For: 2004  
 Primary General Other (specify) ▼

State: LA District 01

Transaction ID: SB23.4240

Date of Disbursement

04 / 18 / 2005

Amount of Each Disbursement this Period

1000.00

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

**11000.00**

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



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)  
A. BOBBY JINDAL

Mailing Address PO BOX 8828

City METAIRIE State LA Zip Code 70011

Purpose of Disbursement

Candidate Name  
BOBBY JINDAL

Office Sought:  House  
Senate  
President  
State: LA District: D1

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4248  
Date of Disbursement

05 / 27 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. CHRIS JOHN

Mailing Address PO BOX 971

City CROWLEY State LA Zip Code 70527

Purpose of Disbursement  
Debt Retirement 2004 Election

Candidate Name  
CHRIS JOHN

Office Sought:  House  
Senate  
President  
State: LA District: D0

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4235  
Date of Disbursement

03 / 28 / 2005

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)  
C. CHARLES J MELANCON

Mailing Address 511 CONGRESS ST STE 1  
PO BOX 549

City NAPOLEONVILLE State LA Zip Code 70390

Purpose of Disbursement

Candidate Name  
CHARLES J MELANCON

Office Sought:  House  
Senate  
President  
State: LA District: D3

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4238  
Date of Disbursement

04 / 18 / 2005

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 19

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)  
A. CHARLES J MELANCON

Mailing Address 511 CONGRESS ST STE 1  
PO BOX 549  
City NAPOLEONVILLE State LA Zip Code 70390

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name  
CHARLES J MELANCON

Office Sought:  House  
Senate  
President  
State: LA District: D3

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB23.4256  
Date of Disbursement  
05 / 02 / 2005

Amount of Each Disbursement this Period  
608.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
B. RIVER OAKS EVENT CENTER

Mailing Address 800 HUGH WALLIS RD  
City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name  
DAVID VITTER

Office Sought: House  
 Senate  
President  
State: LA District: D3

Disbursement For: 2008  
 Primary General  
Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB23.4237  
Date of Disbursement  
03 / 28 / 2005

Amount of Each Disbursement this Period  
800.40

Full Name (Last, First, Middle Initial)  
C. RIVER OAKS EVENT CENTER

Mailing Address 800 HUGH WALLIS RD  
City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name  
CHARLES J MELANCON

Office Sought:  House  
Senate  
President  
State: LA District: D3

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB23.4253  
Date of Disbursement  
05 / 02 / 2005

Amount of Each Disbursement this Period  
608.40

SUBTOTAL of Disbursements This Page (optional) ▶

1408.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ACADIAN AMBULANCE SERVICE, INC. EMPLOYEE PAC

Full Name (Last, First, Middle Initial)

A. DAVID VITTER

Mailing Address 238 HELIOS AVENUE

City State Zip Code  
METAIRIE LA 70005

Purpose of Disbursement  
Debt Retirement 2004 Election

Candidate Name  
DAVID VITTER

Office Sought: House Disbursement For: 2004  
 Senate Primary  General  
 President  
 State: LA District: D0 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.4230

Date of Disbursement

03 / 11 / 2005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. DAVID VITTER

Mailing Address 238 HELIOS AVENUE

City State Zip Code  
METAIRIE LA 70005

Purpose of Disbursement  
IN-KIND CONTRIBUTION

Candidate Name  
DAVID VITTER

Office Sought: House Disbursement For: 2008  
 Senate Primary General  
 President  
 State: LA District: D0 Other (specify) ▼

007  
Category/  
Type

Transaction ID: SB23.4257

Date of Disbursement

03 / 28 / 2005

Amount of Each Disbursement this Period

800.40

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

28408.80