

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)

Cooksey for Congress Committee

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

ADDRESS (number and street)

Post Office Box 7600

Check if different than previously reported.

2. FEC IDENTIFICATION NUMBER 4: 415
C00307348

CITY, STATE and ZIP CODE

Monroe, LA 71211

STATE/DISTRICT

LA 5

3. IS THIS REPORT AN AMENDMENT?

☐ YES

☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report

☐ Twelfth day report preceding

(Type of Election)

☐ July 15 Quarterly Report

election on _____ in the State of _____

☐ October 15 Quarterly Report

☐ Thirtieth day report following the General Election on

☒ January 31 Year End Report

In the State of _____

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Termination Report

This report contains
activity for

☒ Primary Election

☐ General Election

☐ Special Election

☐ Runoff Election

SUMMARY

5. Covering Period	07/01/1999	through	12/31/1999	COLUMN A This Period	COLUMN B Calendar Year-to-date
6. Net Contributions (other than loans)					
(a) Total Contributions (other than loans) (from Line 11(e))				\$76685.25	\$193220.52
(b) Total Contribution Refunds (From Line 20(d))				\$8000.00	\$12950.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))				\$68685.25	\$180270.52
7. Net Operating Expenditures					
(a) Total Operating Expenditures (from Line 17)				\$77456.98	\$152495.20
(b) Total Offsets to Operating Expenditures (from Line 14)				\$347.72	\$1687.29
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))				\$77109.26	\$150807.91
8. Cash on Hand at Close of Reporting Period (from Line 27)				\$251892.78	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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	

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

Ren W. Stewart

Signature of Treasurer

RW Stewart, CPA

Date

1/31/2000

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

FEC FORM 3
(Revised 4/87)

Detailed Summary Page

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) Cooksey for Congress Committee		Report Covering the Period: From: 07/01/1999 To: 12/31/1999	
I. RECEIPTS	Column A	Column B	
	Total This Period	Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (Use Schedule A)	\$28850.00		
(ii) Unitemized	\$4022.40		
(iii) Total of contributions from individual	\$32872.40	\$135958.02	
(b) Political Party Committees	\$0.00	\$0.00	
(c) Other Political Committees (such as PACs)	\$44012.85	\$57262.50	
(d) The Candidate	\$0.00	\$0.00	
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	\$76885.25	\$193220.52	
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 13(a) and (b))	\$0.00	\$0.00	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$347.72	\$1887.29	
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$5840.08	\$10432.50	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$82873.05	\$205380.31	
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	\$77456.98	\$152495.20	
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 19(a) and (b))	\$0.00	\$0.00	
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$2850.00	
(b) Political Party Committees	\$0.00	\$0.00	
(c) Other Political Committees (such as PACs)	\$8000.00	\$10000.00	
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$8000.00	\$12950.00	
21. OTHER DISBURSEMENTS	\$0.00	\$0.00	
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$85456.98	\$185445.20	
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$254476.71	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$82873.05	
25. SUBTOTAL (add Line 23 and Line 24)		\$337349.76	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$85456.98	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$251892.78	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11
FOR LINE NUMBER 11(a)(i)

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 contributors.

NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mr. Kent Anderson 2707 Pargoud Boulevard Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Retired Occupation Banker Aggregate Year-to-Date ->	Date (month, day, year) 12/17/1999 REATTRIBUTION \$-1000.00 MEMO	Amount of Each Receipt this Period \$-1000.00
B. Full Name, Mailing Address and Zip Code Ms. Yvonne Anderson 2707 Pargoud Boulevard Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Homemaker and Farmer Aggregate Year-to-Date ->	Date (month, day, year) 12/17/1999 REATTRIBUTION \$1000.00 MEMO	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Dr. Priscilla P. Asbury 2713 Oak Drive Monroe, LA 71201-2432 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Cooksey and Perry Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/31/1999 REATTRIBUTION \$1000.00 MEMO	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Dr. Ralph Asbury 2713 Oak Drive Monroe, LA 71201 Receipt For: ☐ Primary ☐ General ☒ Other (specify) General 2000	Name of Employer North Louisiana Emergency Asso Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/10/1999 REDESIGNATION of 12.10.1999 MEMO	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code Dr. Ralph Asbury 2713 Oak Drive Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer North Louisiana Emergency Asso Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/10/1999 REATTRIBUTION \$1000.00 MEMO	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Dr. Lionel G. Barraza 2717 Bayou Lane Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/17/1999 REATTRIBUTION \$-1000.00 MEMO	Amount of Each Receipt this Period \$-1000.00
G. Full Name, Mailing Address and Zip Code Dr. Lionel G. Barraza 2717 Bayou Lane Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/17/1999 REATTRIBUTION \$1000.00 MEMO	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE OF
2 11
FOR LINE NUMBER
11(a) (i)

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NAME OF COMMITTEE (in full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mrs. Melise Barrazo 2117 Bayou Lane Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/17/199 REATTRIBUTION \$1000.00	Amount of Each Receipt this Period \$1000.00 MEMO
B. Full Name, Mailing Address and Zip Code Dr. William B. Belsom 3108 River Oaks Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Mrs. Catherine Boles 3012 River Oaks Drive Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Best Effort I Occupation	Date (month, day, year) 12/31/199 \$1000.00	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Mr. Frank Burnside, Jr. Post Office Box 535 Newellton, LA 71357- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Farmer Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 \$1000.00	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Dr. J. Michael Cuge 119 Glenmar Avenue Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Mrs. Barbara R. Cariton 115 Kincaid Lane Boyce, LA 71409- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Roberts & Murphy, Inc. Occupation Vice President Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Benjamin Cooper Association of Oil Pipe Lines 1101 Vermont Ave., N.W., Ste. 604 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Association of Oil Pipe Lines Occupation Executive Director Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$250.00	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 3 OF 11
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mrs. Ronald Lee Davis, Jr. 2008 Island Drive Monroe, LA 71201-	Name of Employer No Employer Occupation Housewife	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$300.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$1000.00		
B. Full Name, Mailing Address and Zip Code Mrs. Frances Denner 83 Little John Lane Dry Prong, LA 71423-8741	Name of Employer No Employer Occupation homemaker	Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$125.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$375.00		
C. Full Name, Mailing Address and Zip Code Mrs. Frances Denner 83 Little John Lane Dry Prong, LA 71423-8741	Name of Employer No Employer Occupation homemaker	Date (month, day, year) 11/18/199	Amount of Each Receipt this Period \$125.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Mr. Max Dillingham 49 Karen Lane Monroe, LA 71203	Name of Employer Dillingham Optical Occupation Owner	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$500.00		
E. Full Name, Mailing Address and Zip Code Dr. Mark Dodson 1113 West Pointe Dr. Alexandria, LA 71303-	Name of Employer self employed Occupation Physician	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$500.00		
F. Full Name, Mailing Address and Zip Code Mr. Charles F. Duguy P. O. Box 9 Marksville, LA 71351	Name of Employer self employed Occupation Real Estate Broker	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$1000.00		
G. Full Name, Mailing Address and Zip Code Mr. Frank Elkins, Jr. P.O. Box 4508 Monroe, LA 71211-4508	Name of Employer Choice Brands, Inc. Occupation Owner	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Aggregate Year-to-Date -> \$500.00		

SUBTOTAL of Receipts This Page (optional)

\$2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 11
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Dr. Rudolph M. Franklin 3535 Blainville Ave., Suite W330 New Orleans, LA 70119-5251 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Dr. Doyle Hamilton 2607 Pargoud Boulevard Monroe, LA 71201-2330 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Maj. Eugene E. Hargrove 205 Broadmoor Blvd. Monroe, LA 71203-4125 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation Retired Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$125.00
D. Full Name, Mailing Address and Zip Code Maj. Eugene E. Hargrove 205 Broadmoor Blvd. Monroe, LA 71203-4125 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/27/199	Amount of Each Receipt this Period \$125.00
E. Full Name, Mailing Address and Zip Code Dr. Bruce Henderson 2121 Fairfield Ave. Shreveport, LA 71104- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$125.00
F. Full Name, Mailing Address and Zip Code Dr. Bruce Henderson 2121 Fairfield Ave. Shreveport, LA 71104- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$125.00
G. Full Name, Mailing Address and Zip Code Dr. R. Howard John 1207 Royal Avenue Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Dentist Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$125.00

SUBTOTAL of Receipts This Page (optional)

\$1625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule(s)
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Detailed Summary Page

PAGE 5 OF 11
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Dr. R. Howard John 1207 Royal Avenue Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Dentist Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 09/14/199	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Dr. R. Howard John 1207 Royal Avenue Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Dentist Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Mr. Roy Johns 3906 Deborah Drive Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer RJA, Inc. Occupation architect Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Dr. Alan Lacoste 1717 Oak Park Blvd. Lake Charles, LA 70601- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Mr. Jerry G. Lazenby 742 Forty Oaks Farm Road West Monroe, LA 71291 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Lazenby & Associates Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Mrs. Toni Lindsay 4502 Wendover Blvd. Alexandria, LA 71303- Receipt For: ☐ Primary ☐ General ☒ Other (specify) Primary	Name of Employer No Employer Occupation Retired Teacher Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Congressman Bob Livingston 499 South Capitol St., S W, Ste. 600 Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer U.S. Government Occupation Congressman Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 This schedule should be
 filed with each category of the
 detailed Summary Page

 PAGE 6 OF 11
 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mr. John E. Maxwell 1604 Forest Creek Drive Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Maxwell's Restaurant Occupation Owner Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Mr. Billy McConnell K & T Property Management Post Office Box 486 Rayville, LA 71269- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation Construction, Property Mgt. Aggregate Year-to-Date -> \$-1000.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$-1000.00 MEMO
C. Full Name, Mailing Address and Zip Code Ms. Millicent McConnell 200 N. Chataqua Road Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation REATTRIBUTION Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$1000.00 MEMO
D. Full Name, Mailing Address and Zip Code Mr. Frank H. Miller 426 Forest Circle Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer T.L. James Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Dr. George B. Mowad 400 East 6th Avenue Oakdale, LA 71463- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Mr. James E. Murphy 1607 N 4th Street Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation Retired Marco Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Mrs. Calvin Myers 222 Rusty Lane Monroe, LA 71203- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer ADMYR, Inc. Occupation Owner Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 7 OF 11
FOR LINE NUMBER 17(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mrs. Calvin Myers 222 Rusty Lane Monroe, LA 71203- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer ANMYR, Inc. Occupation Owner Aggregate Year-to-Date -> \$750.00	Date (month, day, year) 09/14/199	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Dr. Rifat M. Nawas 3270 Deborah Drive Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Mr. Thomas J. Nicholson 3401 Lake Desiard Drive Monroe, LA 71201 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Central Bank Occupation vice-president Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Mr. John A. O'Neal P.O. Box 536 Choudrant, LA 71227 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer O'Neal Gas, Inc. Occupation Owner Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 12/20/199	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Mrs. Ann Padgett 4002 Forsythe Ave. Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Best Effort D Occupation Aggregate Year-to-Date -> \$750.00	Date (month, day, year) 09/14/199	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Mr. Bobbie J. Price 702 Aspen Circle Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Construction Material Inc. Occupation Owner Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 12/31/199	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Mr. Bobbie J. Price 702 Aspen Circle Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Construction Material Inc. Occupation Owner Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 12/31/199 REATTRIBUTE	Amount of Each Receipt this Period \$-550.00 MEMO

SUBTOTAL of Receipts This Page (optional)

\$3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Ms. Flo Price 702 Aspen Circle Ruston, LA 71270- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 REATTRIBUTE \$550.00	Amount of Each Receipt this Period \$550.00 MEMO
B. Full Name, Mailing Address and Zip Code Mr. Robert Ratcliff 1715 England Alexandria, LA 71306- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/14/199 \$1000.00	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Mr. Johnny L. Reeves 336 Barnes Rd. West Monroe, LA 71291 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Dixie Shell Homes of LA Occupation Homebuilder Aggregate Year-to-Date ->	Date (month, day, year) 12/20/199 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Mr. Kevin P. Reilly, Jr. Post Office Box 66338 Baton Rouge, LA 70896- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Lamar Corporation Occupation President Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Dr. Frank A. Riddick, Jr. 1923 Octavia Street New Orleans, LA 70115- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Mr. D. Ryan Sartor, Jr. 2405 Pargoud Boulevard Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Attorney Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Mr. Joe M. Schendle 100 Fairview Dr. Bastrop, LA 71220 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Selegman's Dept. Store Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

\$3050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 9 OF 11
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mr. H. Graham Schneider 3372 Deborah Drive Monroe, LA 71201-2151 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Farmer Aggregate Year-to-Date -> \$1050.00	Date (month, day, year) 10/27/199	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Ms. Jan Schoonmaker 147 E. Street, SE Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Van Scoyoc Associates Occupation Legislative Consultant Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Mrs. Mary Evelyn Scott 193 Eagle Bay Drive Downsville, LA 71234- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation homemaker Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Dr. Ronald E. Shemwell 3348 Deborah Drive Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Mayor Reggie Skains Town of Downsville Post Office Box 98 Downsville, LA 71234- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Town of Downsville Occupation Mayor Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/10/199	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Mr. Joe D. Smith, Jr. P. O. Box 286 Alexandria, LA 71309- Receipt For: ☐ Primary ☐ General ☒ Other (specify) General 2000	Name of Employer self employed Occupation Attorney Aggregate Year-to-Date -> \$2500.00	Date (month, day, year) 12/17/199	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Dr. James M. Smith 1802 Pinehurst Dr. Bastrop, LA 71222- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$125.00

SUBTOTAL of Receipts This Page (optional)

\$2675.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule(s)
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Detailed Summary Page

PAGE 10 OF 11
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Dr. James M. Smith 1802 Pinehurst Dr. Bastrop, LA 71220- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$125.00
B. Full Name, Mailing Address and Zip Code Mr. Carroll Suggs 320 W. Livingston Place Metairie, LA 70003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Mr. Alfred Sunseri 1039 Toulouse St. New Orleans, LA 70112- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer P & J Oyster Co., Inc. Occupation self employed Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 11/18/199	Amount of Each Receipt this Period \$125.00
D. Full Name, Mailing Address and Zip Code Dr. Terry R. Tugwell 1912 North Third Street Monroe, LA 71203- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Dr. Margaret T. Wheat Carter 333 Parkway Natchitoches, LA 71457- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Physician Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Mr. Donald B. Wiener 333 Texas St., Suite 2375 Shreveport, LA 71101- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Wiener, Wess and Madison Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Mrs. Allison Wilkes 1034 North 9th Street Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer self employed Occupation Real Estate Appraisal Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 11 OF 11
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mrs. Barbara H. Williams 339 Richard Linder Rd. Calhoun, LA 71225- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation homemaker Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$125.00 Aggregate Year-to-Date ->
B. Full Name, Mailing Address and Zip Code Mrs. Barbara H. Williams 339 Richard Linder Rd. Calhoun, LA 71225- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer No Employer Occupation homemaker Aggregate Year-to-Date ->	Date (month, day, year) 10/27/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$125.00 Aggregate Year-to-Date ->
C. Full Name, Mailing Address and Zip Code Mr. J. LeRoy Womack 2709 McClellan Monroe, LA 71201-3074 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Self-employed Occupation Investor Real Estate Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date ->
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period Aggregate Year-to-Date ->

SUBTOTAL of Receipts This Page (optional)

\$350.00

TOTAL This Period (last page this line number only)

\$28650.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 1 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Action Committee/Rural Electrification c/o Mike Whelan 4301 Wilson Boulevard Arlington, VA 22203-1860 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code AGC PAC Ms. Joan Huntley La Vor 1957 E Street, NW Washington, DC 20006- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Airline Pilots Association c/o J. Randolph Babbitt 1625 Massachusetts Ave., NW Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/14/199	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code ARCO PAC Jerry A. Pruzan, Director Int'l Affairs North Tower, Suite 400 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/27/199	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code ARPAC Political Action Committee B. Jeffrey Brooks Premier Tower 19th Floor Baton Rouge, LA 70801- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Committee for Advancement of Cotton John Maguire/Carla West 1521 New Hampshire Ave., N W Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Air Transport Association Mike Wascom, Director, Federal Affairs Suite 1100 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/10/199	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11
FOR LINE NUMBERS 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code AOPA Legislative Action Mr. Bill Deere, Vice President Suite 920 Washington, DC 20024- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code The PAC of Alabama Farmers Federation c/o Keith Gray Post Office Box 11023 Montgomery, AL 36191- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code American Dental PAC c/o Francis X. McLaughlin, Jr. Suite 1100 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code American Sugar Cane League Mr. Don Wallace Suite 1103 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code American Assoc. of Orthopaedic Surgeons David A. Lovett, Director Suite 100 Washington, DC 20002- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/20/199	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code American Airlines PAC c/o Julie Nichols Suite 600 Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code American Vol. Medical Assoc. PAC Ms. Lavone Smith Suite 710 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/20/199	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Can separate schedule be
for each category of the
Detailed Summary Page

PAGE 3 OF 11
FOR LINE NUMBER
11 (c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code American Trucking Association Mr. Tim Lynch 430 First Street, SE Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code American Neurological Surgery c/o Ms. Katie O. Orrico Post Office Box 136 Washington, DC 20044-0136 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$1000.00	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code American Neurological Surgery c/o Ms. Katie O. Orrico Post Office Box 136 Washington, DC 20044-0136 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 \$3000.00	Amount of Each Receipt this Period \$2000.00
D. Full Name, Mailing Address and Zip Code American Wood Preservers Institute Scott Ramming, President & CEO Suite 550 Fairfax, VA 22031-4312 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$250.00	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code American Maritime Officers PAC Gordon W. Spencer, Legislative Dir. 490 L'Enfant Plaza East, SW, Ste 7203 Washington, DC 20024- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code American Renewal PAC Post Office Box 20210 Alexandria, VA 22320-1210 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/21/199 Securing America's Future \$79.05	Amount of Each Receipt this Period \$79.05 IN-KIND
G. Full Name, Mailing Address and Zip Code Hall South PAC c/o Bill Oliver 36466 - 675 West Peachtree St., NE Atlanta, GA 30375- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$1000.00	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$5329.05

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Bell South PAC c/o Bill Oliver 36M66 - 675 West Peachtree St., NE Atlanta, GA 30375- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 11/17/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date ->
B. Full Name, Mailing Address and Zip Code Comm. Organized for the Trading of Cotton Neil P. Gillen Washington, DC 20006- Receipt For: ☐ Primary ☐ General ☒ Other (specify) Primary	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date ->
C. Full Name, Mailing Address and Zip Code CR Associates Nick Cavarocchi 317 Massachusetts Ave., NE Ste. 100 Washington, DC 20002- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date ->
D. Full Name, Mailing Address and Zip Code Central and South West Corporation Mark W. Meneses, V.P. Gov. Affairs 801 Pennsylvania Ave., N. W. Ste. 352 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/10/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date ->
E. Full Name, Mailing Address and Zip Code Century Telephone Enterprises PAC c/o John Jones PO Box 4065 Monroe, LA 71207- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date ->
F. Full Name, Mailing Address and Zip Code Chevron Employees PAC Mr. Tom Bresnahan Suite 1200 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date ->
G. Full Name, Mailing Address and Zip Code ConAgra, Inc. Brent Baglien, VP Gov. Affairs Suite 300 Washington, DC 20006-3938 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date ->

SUBTOTAL of Receipts This Page (optional)

\$4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 5 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code ConAgra, Inc. Brent Baglien, VP Gov. Affairs Suite 300 Washington, DC 20006-3939 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 12/10/199	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Conservative Victory Fund Ronald W. Pearson, Exec. Director 104 North Carolina Ave., SE Washington, DC 20003 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Announcements Aggregate Year-to-Date -> \$487.80	Date (month, day, year) 08/09/199	Amount of Each Receipt this Period \$487.80 IN-KIND
C. Full Name, Mailing Address and Zip Code Continental Airlines Inc Nancy B. VanDyne, Staff VP Suite 1250 Washington, DC 20005-3305 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Dairy Farmers of America, Inc. Sam Stone, Vice President Post Office Box 909700 Kansas City, MO 64190-9700 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Delta Airlines Inc., PAC Mr. Scott Yohe Suite 501 Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 10/27/199	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Dow Chemical Company PAC Trish Bharwada 2030 Dow Center Midland, MI 48674- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code EDS Employees PAC John B. Lacopo, Exec. Vice Chairman Suite 1300 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 07/29/199	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$4487.80

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed summary page

PAGE 6 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code ESOP Association PAC J. Michael Keeling, CAE 1726 M Street NW, Suite 501 Washington, DC 20036-4507 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
B. Full Name, Mailing Address and Zip Code Eastman PAC c/o Mr. Lynn Johnson 1300 Wilson Blvd., Ste. 900 Arlington, VA 22203- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Owner Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
C. Full Name, Mailing Address and Zip Code El Paso Energy Corporation Lorie E. Peterson Suite 850 South Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
D. Full Name, Mailing Address and Zip Code ENPAC c/o Jim Pasnell Post Office Box 2431 Baton Rouge, LA 70821- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$3500.00
E. Full Name, Mailing Address and Zip Code Farmland Industries, Inc. P. Scott Shearer Director of National Relations Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
F. Full Name, Mailing Address and Zip Code Freeport McMoran, Inc. Mr. Russell King, VP Suite 1050 Washington, DC 20001- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 08/30/199	Amount of Each Receipt this Period \$1000.00 Aggregate Year-to-Date -> \$1000.00
G. Full Name, Mailing Address and Zip Code GTE Corporation Good Government Club Thomas A. Clarke, Asst. Vice President Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Date (month, day, year) 12/20/199	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 11
FOR LINE NUMBER
11(c)

Any information reported 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)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Halliburton PAC Mr. Don Delin Suite 200 Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code International Shipholding Corp Christian Johnsen 650 Poydras Street, Suite 1700 New Orleans, LA 70130-7228 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code International Paper John C. Runyan Suite 200 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Interstate Natural Gas Assoc. of America 555 13th Street, N W, No. 300-W Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Jones, Walker, Waechter Boitavent, Carrere & Denegre Mr. Christian Johnsen Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/29/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code LASPAC c/o Morris Mintz Post Office Box 80395 Baton Rouge, LA 70898- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Lockheed Martin Jim Desmond Crystal Square Two, Suite 300 Arlington, VA 22202- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/27/199 \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11
FOR LINE NUMBER 11 (C)

Any information received 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)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code MDFPAC James W. Johnson, President 7525 Red River Road Wahpeton, ND 58075- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code McDermott Incorporated Mr. Bruce N. Hatton, VP Suite 100 Arlington, VA 22209- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Mobil Corporation c/o Sara Glenn 1250 H Street, NW, Suite 500 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/27/199 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code NRA Political Victory Fund Mr. Michael E. Williams 410 First Street, SE, 2nd Floor Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199 \$1000.00	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code NRCC c/o Mark Anderson 320 First Street, S. E. Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/09/199 Satellite Feed \$347.65	Amount of Each Receipt this Period \$98.00 IN-KIND
F. Full Name, Mailing Address and Zip Code NRCC c/o Mark Anderson 320 First Street, S. E. Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/21/199 Satellite Feed \$445.65	Amount of Each Receipt this Period \$98.00 IN-KIND
G. Full Name, Mailing Address and Zip Code National Emergency Medicine PAC Debbie Campbell, Political Action Mgr. 1111 19th Street, NW Suite 650 Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3196.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for
tax each category of the
Detailed Summary Page

PAGE 9 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code National Cattleman's Beef Association Mr. Chandler Keys, III Suite 300 Washington, DC 20004- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199 \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code National Council of Farmers Cooperatives Co-op PAC c/o Randall Jones Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Nat'l Automobile Dealers Assoc. Mr. Tom Greene 412 First Street, SE Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Nat'l Community Pharmacists Assoc. John M. Restor, Esq. 205 Daingerfield Road Alexandria, VA 22314-2685 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$1000.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code National Fuel's PRO-PAC Jon Gellinger 10 LeCayette Square, Room 900 Buffalo, NY 14203- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Northwest Airlines PAC c/o Reed Van De Water 901 15th Street, NW, Suite 500 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code RAILPAC c/o Cassandra Henry 50 F Street, NW Washington, DC 20001- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mainland and Hail Insurance Society PAC 1501 50th St., Suite 200 West Des Moines, IA 50266- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199 \$500.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Realtors PAC Mr. David Lynch 100 Eleventh Street, N.W. Washington, DC 20001-4507 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/10/199 \$-500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code SEPAC Mr. James F. Rich, Jr. 1401 Eye Street, N.W. Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 \$500.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Southern Minnesota Sugar Cooperative PAC c/o Pat Ravehorst Renville, MN 56284- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Southwest Airlines Co. Freedom Fund PAC Tomas B. Chapman, Legislative Counsel 1250 Eye Street, N. W., Suite 11110 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/20/199 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Texaco PAC Mr. Jim Pruitt Suite 500 Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code United Airlines PAC Mark Anderson 1025 Connecticut Avenue, NW Washington, DC 20036- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199 \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of (22)
Detailed Receipt Page

PAGE 11 OF 11
FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code United Parcel Service c/o Kurt Pfotenhauser 316 Pennsylvania Avenue, SE Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/14/199	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code United Parcel Service c/o Kurt Pfotenhauser 316 Pennsylvania Avenue, SE Washington, DC 20003- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/06/199	Amount of Each Receipt this Period \$2000.00
C. Full Name, Mailing Address and Zip Code Zeneca Incorporated PAC Dyan McGrath Suite 804 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/10/199	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code , Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code , Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code , Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code , Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$3500.00

TOTAL This Period (last page this line number only)

\$44012.85

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/31/199 07/31/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$22.27 \$4634.69
B. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 07/31/199 07/31/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$901.91 \$5536.60
C. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/30/199 08/30/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$931.82 \$6468.42
D. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 08/31/199 08/31/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$24.23 \$6492.65
E. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/199 09/30/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$928.31 \$7420.96
F. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 09/30/199 09/30/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$24.19 \$7445.15
G. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/31/199 10/31/199 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$14.37 \$7459.52

SUBTOTAL of Receipts This Page (optional)

\$2847.10

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category at the
Detailed Summary PagePAGE 2 OF 2
FOR LINE NUMBER
15

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/31/199 \$8449.52	Amount of Each Receipt this Period \$990.00
B. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 11/30/199 \$9422.75	Amount of Each Receipt this Period \$973.23
C. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 11/30/199 \$9433.15	Amount of Each Receipt this Period \$10.40
D. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 \$9448.57	Amount of Each Receipt this Period \$15.42
E. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 12/31/199 \$10452.50	Amount of Each Receipt this Period \$1003.93
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$2992.98

TOTAL This Period (last page this line number only)

\$5840.08

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code American Express Post Office Box 630012 Dallas, TX 75263-0012	Purpose of Disbursement promotional christmas Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$1420.00
B. Full Name, Mailing Address and Zip Code American Express Post Office Box 630012 Dallas, TX 75263-0012	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/25/199	Amount of Each Disbursement This Period \$55.00
C. Full Name, Mailing Address and Zip Code Aristotle 205 Pennsylvania Avenue Washington, DC 20002-	Purpose of Disbursement technical support Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$1650.00
D. Full Name, Mailing Address and Zip Code Broadcast Supply Worldwide 7012 27th Street West Tacoma, WA 98466-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/13/199	Amount of Each Disbursement This Period \$936.00
E. Full Name, Mailing Address and Zip Code Barthel Wholesale 20 Highway 135 Rayville, LA 71269-	Purpose of Disbursement promotion 10.16.99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$120.12
F. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/22/199	Amount of Each Disbursement This Period \$228.34
G. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/08/199	Amount of Each Disbursement This Period \$153.19

SUBTOTAL of Disbursements This Page (optional)

\$4462.65

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 10/27/199	Amount of Each Disbursement This Period \$282.17
B. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 12/06/199	Amount of Each Disbursement This Period \$93.54
C. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 08/04/199	Amount of Each Disbursement This Period \$250.58
D. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 12/28/199	Amount of Each Disbursement This Period \$156.09
E. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$254.14
F. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 08/17/199	Amount of Each Disbursement This Period \$239.35
G. Full Name, Mailing Address and Zip Code BellSouth 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ other (specify)	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$241.58

SUBTOTAL of Disbursements This Page (optional)

\$1517.45

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$20.00
B. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/09/199	Amount of Each Disbursement This Period \$20.00
C. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$20.00
D. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$20.00
E. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$20.00
F. Full Name, Mailing Address and Zip Code Centurytel Security System, Inc. 504 Washington Street Monroe, LA 71201-	Purpose of Disbursement security Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$19.86
G. Full Name, Mailing Address and Zip Code Institute Congressional 316 Pennsylvania Ave., N.E. Suite 403 Washington, DC 20003-1146	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$540.00

SUBTOTAL of Disbursements This Page (optional)

\$659.86

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 4 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Conservative Victory Fund Ronald W. Pearson, Exec. Director 104 North Caroline Ave., SE Washington, DC 20003	Purpose of Disbursement Announcements Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$487.80 IN KIND
B. Full Name, Mailing Address and Zip Code Senator B. G. Dyess Campaign 2015 Shirley Park Place Alexandria, LA 71301-	Purpose of Disbursement promotional Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/12/199	Amount of Each Disbursement This Period \$250.00
C. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$100.97
D. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/13/199	Amount of Each Disbursement This Period \$116.69
E. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$113.38
F. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/09/199	Amount of Each Disbursement This Period \$65.68
G. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/07/199	Amount of Each Disbursement This Period \$98.65

SUBTOTAL of Disbursements This Page (optional)

\$1233.17

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Entergy Post Office Box 64001 New Orleans, LA 70164-4001	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$47.41
B. Full Name, Mailing Address and Zip Code Fellowship of Christian Athletes Breauk Nader, Area Director 401 West Mississippi Ave. Ruston, LA 71270-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$1000.00
C. Full Name, Mailing Address and Zip Code Frank & Janie's Seafood Restaurant 200 Kansas Lane Monroe, LA 71203-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/31/199	Amount of Each Disbursement This Period \$648.29
D. Full Name, Mailing Address and Zip Code Jimmy Gravois Catering Service 7216 Constantine Ave. Springfield, VA 22150-	Purpose of Disbursement promotion Washington per 07.28.99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/28/199	Amount of Each Disbursement This Period \$5022.00
E. Full Name, Mailing Address and Zip Code Shannon Hagen 132 Woodstock Drive Youngsville, LA 70592-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/30/199	Amount of Each Disbursement This Period \$275.85
F. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/02/199	Amount of Each Disbursement This Period \$300.00
G. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/01/199	Amount of Each Disbursement This Period \$300.00

SUBTOTAL of Disbursements This Page (optional)

\$7593.55

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 07
6 25
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$300.00
B. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/02/199	Amount of Each Disbursement This Period \$300.00
C. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$300.00
D. Full Name, Mailing Address and Zip Code Hales Insurance 2225 Justice, Suite D Monroe, LA 71201-	Purpose of Disbursement rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/12/199	Amount of Each Disbursement This Period \$300.00
E. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes 2nd Qtr. Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$32.55
F. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/15/199	Amount of Each Disbursement This Period \$371.60
G. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/30/199	Amount of Each Disbursement This Period \$281.44

SUBTOTAL of Disbursements This Page (optional)

\$1885.59

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$281.46
B. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/29/199	Amount of Each Disbursement This Period \$388.08
C. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/16/199	Amount of Each Disbursement This Period \$301.31
D. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/30/199	Amount of Each Disbursement This Period \$281.45
E. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$281.45
F. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/20/199	Amount of Each Disbursement This Period \$0.09
G. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$281.45

SUBTOTAL of Disbursements This Page (optional)

\$1823.29

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 8 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Hibernia National Bank 600 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/01/199	Amount of Each Disbursement This Period \$416.47
B. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/30/199	Amount of Each Disbursement This Period \$281.45
C. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/15/199	Amount of Each Disbursement This Period \$281.45
D. Full Name, Mailing Address and Zip Code Hibernia National Bank 800 Sterlington Road Monroe, LA 71201-	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/31/199	Amount of Each Disbursement This Period \$281.45
E. Full Name, Mailing Address and Zip Code Hibernia Capital Access Post Office Box 60003 New Orleans, LA 70160-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/17/199	Amount of Each Disbursement This Period \$212.20
F. Full Name, Mailing Address and Zip Code U. S. House Members Dining Capitol Hill Club 300 First, S E Washington, DC 20003-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/22/199	Amount of Each Disbursement This Period \$212.20 MEMO
G. Full Name, Mailing Address and Zip Code Hibernia Capital Access Post Office Box 60385 New Orleans, LA 70160-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$42.00

SUBTOTAL of Disbursements This Page (optional)

\$1515.02

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule for each category of the detailed summary page

PAGE 9 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code U. S. House Members Dining Capitol Hill Club 300 First , S E Washington, DC 20003-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/25/199	Amount of Each Disbursement This Period \$42.00 MEMO
B. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$75.85
C. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$64.42
D. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$19.95
E. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/23/199	Amount of Each Disbursement This Period \$19.95
F. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$75.00
G. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/13/199	Amount of Each Disbursement This Period \$34.18

SUBTOTAL of Disbursements This Page (optional)

\$289.35

TOTAL This Period (Last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use appropriate schedule(s) for each category of line item. See Detailed Reporting Page

PAGE 10 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$75.00
B. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/28/199	Amount of Each Disbursement This Period \$19.95
C. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$47.45
D. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/27/199	Amount of Each Disbursement This Period \$75.00
E. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement phone expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$44.56
F. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$19.95
G. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/06/199	Amount of Each Disbursement This Period \$19.95

SUBTOTAL of Disbursements This Page (optional)

\$301.86

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 11 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 11/04/199	Amount of Each Disbursement This Period \$19.95
B. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement computer expense Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$73.87
C. Full Name, Mailing Address and Zip Code Intermedia Communications 1816 Roselawn Monroe, LA 71201-	Purpose of Disbursement phone expense Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$151.13
D. Full Name, Mailing Address and Zip Code Jacque's Catering 4210 Pecan Drive Alexandria, LA 71302-	Purpose of Disbursement promotion Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 09/30/199	Amount of Each Disbursement This Period \$558.00
E. Full Name, Mailing Address and Zip Code KLIL Cajun Broadcasting, Inc. Post Office Box 365 Moreauville, LA 71355-	Purpose of Disbursement promotional Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 09/02/199	Amount of Each Disbursement This Period \$350.00
F. Full Name, Mailing Address and Zip Code KLIL Cajun Broadcasting, Inc. Post Office Box 365 Moreauville, LA 71355-	Purpose of Disbursement promotional Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 12/06/199	Amount of Each Disbursement This Period \$75.00
G. Full Name, Mailing Address and Zip Code KLIL Cajun Broadcasting, Inc. Post Office Box 365 Moreauville, LA 71355-	Purpose of Disbursement promotional Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 08/04/199	Amount of Each Disbursement This Period \$200.00

SUBTOTAL of Disbursements This Page (optional)

\$1427.95

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 12 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$200.00
B. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$610.00
C. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$160.00
D. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/09/199	Amount of Each Disbursement This Period \$200.00
E. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$570.00
F. Full Name, Mailing Address and Zip Code KVCL P. O. Box 548 Winnfield, LA 71483-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/07/199	Amount of Each Disbursement This Period \$200.00
G. Full Name, Mailing Address and Zip Code Legacy Aviation 5410 Operations Road Monroe, LA 71203-6189	Purpose of Disbursement travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$453.85

SUBTOTAL of Disbursements This Page (optional)

\$2393.85

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 13 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mystic Krewe of Louisiana P. O. Box 44005 Washington, DC 20026-	Purpose of Disbursement Mardi Gras expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$550.00
B. Full Name, Mailing Address and Zip Code Mystic Krewe of Louisiana P. O. Box 44005 Washington, DC 20026-	Purpose of Disbursement Mardi Gras expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/29/199	Amount of Each Disbursement This Period \$1000.00
C. Full Name, Mailing Address and Zip Code LA Department of Revenue and Taxation P.O. Box 9107 Baton Rouge, LA 70821-9017	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/20/199	Amount of Each Disbursement This Period \$137.00
D. Full Name, Mailing Address and Zip Code LA Department of Revenue and Taxation P.O. Box 9107 Baton Rouge, LA 70821-9017	Purpose of Disbursement payroll taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$154.00
E. Full Name, Mailing Address and Zip Code Monroe Monroe 800 Washington Street, Suite 104 Monroe, LA 71201-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/28/199	Amount of Each Disbursement This Period \$280.00
F. Full Name, Mailing Address and Zip Code NRA 11250 Waples Mill Rd. Fairfax, VA 22030-	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/05/199	Amount of Each Disbursement This Period \$250.00
G. Full Name, Mailing Address and Zip Code NRCC c/o Mark Anderson 320 First Street, S. E. Washington, DC 20003-	Purpose of Disbursement Incubment Support Fund Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/02/199	Amount of Each Disbursement This Period \$12000.00

SUBTOTAL of Disbursements This Page (optional)

\$14371.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 14 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code NRCC c/o Mark Anderson 320 First Street, S. E. Washington, DC 20003-	Purpose of Disbursement Satellite Feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/21/199	Amount of Each Disbursement This Period \$98.00 IN KIND
B. Full Name, Mailing Address and Zip Code NRCC c/o Mark Anderson 320 First Street, S. E. Washington, DC 20003-	Purpose of Disbursement Satellite Feed Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/09/199	Amount of Each Disbursement This Period \$98.00 IN KIND
C. Full Name, Mailing Address and Zip Code Office of Employment Security LA Department of Labor Post Office Box 94050 Baton Rouge, LA 70804-9050	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$148.50
D. Full Name, Mailing Address and Zip Code Office of Employment Security LA Department of Labor Post Office Box 94050 Baton Rouge, LA 70804-9050	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/20/199	Amount of Each Disbursement This Period \$36.92
E. Full Name, Mailing Address and Zip Code Office Depot 2301 Louisville Ave. Monroe, LA 71201-	Purpose of Disbursement office supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/23/199	Amount of Each Disbursement This Period \$19.50
F. Full Name, Mailing Address and Zip Code Office Depot 2301 Louisville Ave. Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/28/199	Amount of Each Disbursement This Period \$34.11
G. Full Name, Mailing Address and Zip Code Office Depot 2301 Louisville Ave. Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/06/199	Amount of Each Disbursement This Period \$107.30

SUBTOTAL of Disbursements This Page (optional)

\$542.33

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

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

PAGE	OF
15	25
FOR LINE NUMBER	
17	

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Persgrine Corporation 504 N 17th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/27/199	Amount of Each Disbursement This Period \$381.92
B. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/25/199	Amount of Each Disbursement This Period \$132.00
C. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement stamps Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/02/199	Amount of Each Disbursement This Period \$72.60
D. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement annual box rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/02/199	Amount of Each Disbursement This Period \$194.00
E. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/15/199	Amount of Each Disbursement This Period \$462.00
F. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement stamps Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/31/199	Amount of Each Disbursement This Period \$46.20
G. Full Name, Mailing Address and Zip Code Postmaster 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement stamps Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/22/199	Amount of Each Disbursement This Period \$1320.00

SUBTOTAL of Disbursements This Page (optional)

\$2608.72

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 16 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Public Opinion Strategies c/o Glen Bolger 1033 N. Fairfax Street Alexandria, VA 22314-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/27/199	Amount of Each Disbursement This Period \$15000.00
B. Full Name, Mailing Address and Zip Code Quick Print Photo, Inc. 1609 N. 18th Street Monroe, LA 71201-	Purpose of Disbursement photo expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$509.13
C. Full Name, Mailing Address and Zip Code Quick Print Photo, Inc. 1609 N. 18th Street Monroe, LA 71201-	Purpose of Disbursement photo expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/07/199	Amount of Each Disbursement This Period \$10.80
D. Full Name, Mailing Address and Zip Code John Rea Realty 1901 Royyal Avenue Monroe, LA 71201-	Purpose of Disbursement promotion 10.03.99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/20/199	Amount of Each Disbursement This Period \$250.00
E. Full Name, Mailing Address and Zip Code John Rea Realty 1901 Royyal Avenue Monroe, LA 71201-	Purpose of Disbursement promotion 10.03.99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/20/199	Amount of Each Disbursement This Period \$200.00
F. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/01/199	Amount of Each Disbursement This Period \$19.02
G. Full Name, Mailing Address and Zip Code Postmaster: 501 Sterlington Road Monroe, LA 71203-	Purpose of Disbursement postage busby Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/25/199	Amount of Each Disbursement This Period \$66.00 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$16048.95

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 17 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/15/199	Amount of Each Disbursement This Period \$275.51
B. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$45.00 MEMO
C. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$54.00 MEMO
D. Full Name, Mailing Address and Zip Code Sam's Wholesale 3805 North Boulevard Alexandria, LA 71301-	Purpose of Disbursement promotional 10.15.99 Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$176.51 MEMO
E. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/20/199	Amount of Each Disbursement This Period \$216.99
F. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/29/199	Amount of Each Disbursement This Period \$58.00
G. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping to washington Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/15/199	Amount of Each Disbursement This Period \$33.75 MEMO

SUBTOTAL of Disbursements This Page (optional)

\$550.50

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the detailed Summary Page

PAGE 10 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping to washington Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/27/199	Amount of Each Disbursement This Period \$24.25 MEMO
B. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$190.29
C. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping to washington Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/27/199	Amount of Each Disbursement This Period \$21.75 MEMO
D. Full Name, Mailing Address and Zip Code Sam's Wholesale 3805 North Boulevard Alexandria, LA 71301-	Purpose of Disbursement promotional Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/29/199	Amount of Each Disbursement This Period \$16.52 MEMO
E. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement SEE BELOW Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/02/199	Amount of Each Disbursement This Period \$31.40
F. Full Name, Mailing Address and Zip Code Federal Express 1309 Oliver Road Monroe, LA 71201-	Purpose of Disbursement shipping to washington Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/25/199	Amount of Each Disbursement This Period \$15.00 MEMO
G. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/30/199	Amount of Each Disbursement This Period \$755.30

SUBTOTAL of Disbursements This Page (optional)

\$976.99

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 19 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/25/199	Amount of Each Disbursement This Period \$396.02
B. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/31/199	Amount of Each Disbursement This Period \$755.30
C. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/30/199	Amount of Each Disbursement This Period \$755.30
D. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/15/199	Amount of Each Disbursement This Period \$755.30
E. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$755.30
F. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/15/199	Amount of Each Disbursement This Period \$755.30
G. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/01/199	Amount of Each Disbursement This Period \$755.30

SUBTOTAL of Disbursements This Page (optional)

\$4927.82

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 20 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$755.30
B. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/30/199	Amount of Each Disbursement This Period \$755.30
C. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/16/199	Amount of Each Disbursement This Period \$755.30
D. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$755.30
E. Full Name, Mailing Address and Zip Code Kenda Reed 106 Racove West Monroe, LA 71291-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/30/199	Amount of Each Disbursement This Period \$755.30
F. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/17/199	Amount of Each Disbursement This Period \$253.38
G. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/14/199	Amount of Each Disbursement This Period \$97.62

SUBTOTAL of Disbursements This Page (optional)

\$4127.50

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 21 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/15/199	Amount of Each Disbursement This Period \$61.18
B. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/15/199	Amount of Each Disbursement This Period \$185.28
C. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/15/199	Amount of Each Disbursement This Period \$13.42
D. Full Name, Mailing Address and Zip Code Sav-on Discount Office Supply 1701 North 18th Street Monroe, LA 71201-	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/13/199	Amount of Each Disbursement This Period \$71.55
E. Full Name, Mailing Address and Zip Code Schepis Museum Post Office Box 743 Columbia, LA 71418-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/16/199	Amount of Each Disbursement This Period \$210.00
F. Full Name, Mailing Address and Zip Code Schepis Museum Post Office Box 743 Columbia, LA 71418-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 09/16/199	Amount of Each Disbursement This Period \$50.00
G. Full Name, Mailing Address and Zip Code Mark Shoffner 6060 Village Bend Drive #2003 Dallas, TX 75206-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/16/199	Amount of Each Disbursement This Period \$109.32

SUBTOTAL of Disbursements This Page (optional)

\$700.75

TOTAL This Period (Last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 22 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Mark Shoffner 6060 Village Bend Drive #2003 Dallas, TX 75206-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/30/199	Amount of Each Disbursement This Period \$195.07
B. Full Name, Mailing Address and Zip Code Mark Shoffner 6060 Village Bend Drive #2003 Dallas, TX 75206-	Purpose of Disbursement payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/15/199	Amount of Each Disbursement This Period \$285.49
C. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/23/199	Amount of Each Disbursement This Period \$630.39
D. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$54.25
E. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Salary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$52.77
F. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/04/199	Amount of Each Disbursement This Period \$167.09
G. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$649.39

SUBTOTAL of Disbursements This Page (optional)

\$2034.45

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 23 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/30/199	Amount of Each Disbursement This Period \$811.04
B. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/20/199	Amount of Each Disbursement This Period \$32.55
C. Full Name, Mailing Address and Zip Code Sir Speedy Mark and Karen O'Keefe 1825 Avenue of America Monroe, LA 71201-	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/09/199	Amount of Each Disbursement This Period \$113.93
D. Full Name, Mailing Address and Zip Code Southwest Computer Bureau, Inc. 1048 E. Cornerview Gonzales, LA 70737-	Purpose of Disbursement promotional Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/04/199	Amount of Each Disbursement This Period \$679.91
E. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 12/08/199	Amount of Each Disbursement This Period \$31.31
F. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/13/199	Amount of Each Disbursement This Period \$31.31
G. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/04/199	Amount of Each Disbursement This Period \$31.31

SUBTOTAL of Disbursements This Page (optional)

\$1731.36

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
24 25
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$31.31
B. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/07/199	Amount of Each Disbursement This Period \$31.31
C. Full Name, Mailing Address and Zip Code Taxation and Revenue Department City of Monroe P.O. Box 1743 Monroe, LA 71210-1743	Purpose of Disbursement utilities Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$31.31
D. Full Name, Mailing Address and Zip Code Thurman's Food Factory 1608 Stubbs Avenue Monroe, LA 71201-	Purpose of Disbursement promotion Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$312.38
E. Full Name, Mailing Address and Zip Code Time Warner Cable Post Office Box 30020 Shreveport, LA 71130-0020	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 07/26/199	Amount of Each Disbursement This Period \$33.24
F. Full Name, Mailing Address and Zip Code Time Warner Cable Post Office Box 30020 Shreveport, LA 71130-0020	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 08/31/199	Amount of Each Disbursement This Period \$33.24
G. Full Name, Mailing Address and Zip Code Time Warner Cable Post Office Box 30020 Shreveport, LA 71130-0020	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12/06/199	Amount of Each Disbursement This Period \$33.24

SUBTOTAL of Disbursements This Page (optional)

\$506.03

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 25 OF 25
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code Time Warner Cable Post Office Box 30020 Shreveport, LA 71130-0020	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/04/199	Amount of Each Disbursement This Period \$33.24
B. Full Name, Mailing Address and Zip Code Time Warner Cable Post Office Box 30020 Shreveport, LA 71130-0020	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 10/27/199	Amount of Each Disbursement This Period \$33.24
C. Full Name, Mailing Address and Zip Code Vittec for Congress 2520 Metairie Road Metairie, LA 70001-	Purpose of Disbursement contribution 2000 primary Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 09/27/199	Amount of Each Disbursement This Period \$1000.00
D. Full Name, Mailing Address and Zip Code Xerox Corporation P.O. Box 660501 Dallas, TX 75266-0501	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/09/199	Amount of Each Disbursement This Period \$27.94
E. Full Name, Mailing Address and Zip Code Xerox Corporation P.O. Box 660501 Dallas, TX 75266-0501	Purpose of Disbursement office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 07/29/199	Amount of Each Disbursement This Period \$27.94
F. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$1122.36

TOTAL This Period (last page this line number only)

\$75352.35

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule (a) for each category of the Detailed Budgetary Page

PAGE 1 OF 1
FOR LINE NUMBER 20c

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NAME OF COMMITTEE (In Full)

Cooksey for Congress Committee

A. Full Name, Mailing Address and Zip Code American Society of Anesthesiologists Mr. Manuel Bonilla Suite 606 Washington, DC 20005-	Purpose of Disbursement Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/02/199	Amount of Each Disbursement This Period \$2500.00
B. Full Name, Mailing Address and Zip Code American Society of Anesthesiologists Mr. Manuel Bonilla Suite 606 Washington, DC 20005-	Purpose of Disbursement Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 08/23/199	Amount of Each Disbursement This Period \$3500.00
C. Full Name, Mailing Address and Zip Code Associated Builders & Contractors Charlotte W. Herbert 1300 North 17th Street Arlington, VA 22209-	Purpose of Disbursement refund of contribution 06.11.98 Disbursement for: ☐ Primary ☐ General ☒ Other (specify): Primary	Date (month, day, year) 12/30/199	Amount of Each Disbursement This Period \$500.00
D. Full Name, Mailing Address and Zip Code ConAgra, Inc. Brent Baglien, VP Gov. Affairs Suite 300 Washington, DC 20006-3939	Purpose of Disbursement reported general Disbursement for: ☒ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 11/09/199	Amount of Each Disbursement This Period \$500.00
E. Full Name, Mailing Address and Zip Code Dow Chemical Company PAC Trish Sherwada 2030 Dow Center Midland, MI 48674-	Purpose of Disbursement Disbursement for: ☐ Primary ☒ General ☐ Other (specify):	Date (month, day, year) 08/23/199	Amount of Each Disbursement This Period \$1000.00
F. Full Name, Mailing Address and Zip Code /	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period /
G. Full Name, Mailing Address and Zip Code /	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) / /	Amount of Each Disbursement This Period /

SUBTOTAL of Disbursements This Page (optional)

\$8000.00

TOTAL This Period (last page this line number only)

\$8000.00

SCHEDULE C

LOANS

Page 1 of for
LINE NUMBER 10

NAME OF COMMITTEE (In Full) Cooksey for Congress Committee			
A. Full Name, Mailing Address and ZIP Code of Loan Borrower Dr. John Cooksey 2110 Maywood Drive Monroe, LA 71201	Original Amount of Loan \$105531.00	Cumulative Payments To Date \$100000.00	Balance outstanding at close of this period \$5531.00
Election: ☐ Primary ☐ General ☒ other (specify) Primary			
Terms: Date Invoiced 03/14/199 Date Due on demand Interest Rate 0.00 % (apr) Secured NO			
List All Endorsers or Cosigners (if any) to Item A			
Full Name, Mailing Address and Zip Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding		

SUBTOTAL This Period This Page (optional)	\$5531.00
TOTAL This Period (last page this line number only)	\$5531.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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