

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 20 A 11:29

1. NAME OF COMMITTEE (In full) BAYDOL LEADER POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00330464
ADDRESS (number and street) 524 FORT WILLIAMS PARKWAY	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE ALEXANDRIA VA 22304		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

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

Termination report

Monthly Report Due On:

<input type="checkbox"/> February 20	<input checked="" type="checkbox"/> June 20	<input type="checkbox"/> October 20
<input type="checkbox"/> March 20	<input type="checkbox"/> July 20	<input type="checkbox"/> November 20
<input type="checkbox"/> April 20	<input type="checkbox"/> August 20	<input type="checkbox"/> December 20
<input type="checkbox"/> May 20	<input type="checkbox"/> September 20	<input type="checkbox"/> January 31

Twelfth day report preceding _____
(election type) _____
election on _____ in the State of _____

Thirtieth day report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>05/01/2000</u> through <u>05/31/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		121918.59
(b) Cash on Hand at Beginning of Reporting Period	137970.30	
(c) Total Receipts (from line 19)	20009.77	108398.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	157980.07	230318.52
7. Total Disbursements (from line 30)	10854.65	63303.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	147015.41	147015.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
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 Filed by Emily Young Shaw		
Signature of Treasurer 		Date 6/19/00

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
(PAGE 2, FEC FORM 3X)**

[revised 1/1/91]

NAME OF COMMITTEE BAYOU LEADER POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD FROM 05/01/2000 TO: 05/31/2000		
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:				
a. Individual/Persons Other Than Political Committees				
i. Itemized (use Schedule A)	1500.00	23182.00	11.a.i.	
ii. Unitemized	0.00	752.65	11.a.ii.	
iii. Total (add i and ii)	1500.00	23934.65	11.a.iii.	
b. Political Party Committees	0.00	0.00	11.b.	
c. Other Political Committees (such as PACs)	10509.77	84465.28	11.c.	
d. Total Contributions (add a iii, b and c)	20009.77	108399.93	11.d.	
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.	
13. All Loans Received	0.00	0.00	13.	
14. Loan Repayments Received	0.00	0.00	14.	
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.	
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16.	
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.	
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.	
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	20009.77	108399.93	19.	
20. Total Federal Receipts (subtract line 18 from line 19)	20009.77	108399.93	20.	
II. Disbursements				
21. Operating Expenditures:				
a. Shared Federal/Non-Federal Activity (from Schedule H4)				
i. Federal Share	0.00	0.00	21.a.i.	
ii. Non-Federal Share	0.00	0.00	21.a.ii.	
b. Other Federal Operating Expenditures	3264.68	22288.11	21.b.	
c. Total Operating Expenditures (add a i, a ii, and b)	3264.68	22288.11	21.c.	
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.	
23. Contributions to Federal Candidates/Committees and Other Political Committees	7700.00	59265.00	23.	
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441b(f)) (use Sch. F)	0.00	0.00	25.	
26. Loan Repayments Made	0.00	0.00	26.	
27. Loans Made	0.00	0.00	27.	
28. Refunds of Contributions To:				
a. Individual/Persons Other Than Political Committees	0.00	0.00	28.a.	
b. Political Party Committees	0.00	0.00	28.b.	
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.	
d. Total Contributions Refunds (add a, b, and c)	0.00	0.00	28.d.	
29. Other Disbursements	0.00	1750.00	29.	
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	10964.66	83303.11	30.	
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	10564.66	83303.11	31.	
III. Net Contributions / Operating Expenditures				
32. Total Contributions (other than loans) (from line 11d)	20009.77	108399.93	32.	
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.	
34. Net Contributions (other than loans) (subtract line 33 from line 32)	20009.77	108399.93	34.	
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	3264.68	22288.11	35.	
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.	
37. Net Operating Expenditures (subtract line 36 from line 35)	3264.68	22288.11	37.	

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER
11A1

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

**NAME OF COMMITTEE (In Full)
BAYOU LEADER POLITICAL ACTION COMMITTEE**

Full Name, Mailing Address, and ZIP Code Vivian Pecus 3731 Madison Lane Apt. B Falls Church VA 22041	Name of Employer Self-Employed	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 500.00
	Occupation Consultant: Computer Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
Full Name, Mailing Address, and ZIP Code William D. Sanders 7777 Market Center Avenue El Paso TX 79912	Name of Employer Security Capital Group, Inc.	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 500.00
	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code William G. Schumacher, M.D. Route 2 Box 723 Sunset LA 70584	Name of Employer Self-Employed	Date (month, day, year) 05/28/2000	Amount of Each Receipt this Period 500.00
	Occupation Anesthesiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

1500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11C

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**NAME OF COMMITTEE (in Full)
BAYOU LEADER POLITICAL ACTION COMMITTEE**

Full Name, Mailing Address, and ZIP Code FEDERATION OF AMERICAN HEALTH SYSTEMS POLITICAL ACTION COMMITTEE 801 PENNSYLVANIA AVENUE SUITE 245 WASHINGTON DC 20004	Name of Employer ACTION COMMITTEE Occupation	Date (month, day, year) 05/04/2000 In-Kind: Catering; Catering By Windows	Amount of Each Receipt this Period 1009.77
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1009.77		
Full Name, Mailing Address, and ZIP Code FEDERATION OF AMERICAN HEALTH SYSTEMS POLITICAL ACTION COMMITTEE 801 PENNSYLVANIA AVENUE SUITE 245 WASHINGTON DC 20004	Name of Employer ACTION COMMITTEE Occupation	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2009.77		
Full Name, Mailing Address, and ZIP Code GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE 1299 PENNSYLVANIA AVE NW SUITE 1100 WASHINGTON DC 20004	Name of Employer ACTION COMMITTEE Occupation	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURPAC) 412 FIRST STREET SE SUITE 300 WASHINGTON DC 20003	Name of Employer POLITICAL ACTION COMMITTEE (INSURPAC) Occupation	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code NATIONAL MARINE MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE 1819 L STREET NW SUITE 700 WASHINGTON HARBOR WASHINGTON DC 20036	Name of Employer POLITICAL ACTION COMMITTEE Occupation	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code SWISHER INTERNATIONAL INC PAC FUND 45B EAST 16TH STREET JACKSONVILLE FL 32208	Name of Employer Occupation	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code COMMUNICATIONS SATELLITE CORPORATION (COMSAT) COMSATPAC 8560 ROCK SPRING DRIVE BETHESDA MD 20817	Name of Employer COMSATPAC Occupation	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER
11C

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NAME OF COMMITTEE (In Full)
BAYOU LEADER POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC) 1111 NORTH FAIRFAX STREET ALEXANDRIA VA 22314	Name of Employer PT-PAC Occupation	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code AMERICAN CHIROPRACTIC ASSOCIATION POLITICAL ACTION COMMITTEE 1701 CLARENDON BOULEVARD ARLINGTON VA 22209	Name of Employer AMERICAN CHIROPRACTIC ASSOCIATION POLITICAL ACTION COMMITTEE Occupation	Date (month, day, year) 05/28/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code AMERICAN SOCIETY OF ANESTHESIOLOGISTS INCORPORATED POLITICAL ACTION COMMITTEE 520 N. NORTHWEST HIGHWAY PARK RIDGE IL 60068	Name of Employer AMERICAN SOCIETY OF ANESTHESIOLOGISTS INCORPORATED POLITICAL ACTION COMMITTEE Occupation	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3000.00		
Full Name, Mailing Address, and ZIP Code AVENTIS PASTEUR POLITICAL ACTION COMMITTEE PO BOX 187 SWIFTWATER PA 18370	Name of Employer AVENTIS PASTEUR POLITICAL ACTION COMMITTEE Occupation	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code BELL SOUTH TELECOMMUNICATIONS INC EMPLOYEES FEDERAL POLITICAL ACTION COMMITTEE 1156 PEACHTREE ST N E SUITE 1925 ATLANTA GA 30309	Name of Employer BELL SOUTH TELECOMMUNICATIONS INC EMPLOYEES FEDERAL POLITICAL ACTION COMMITTEE Occupation	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2500.00		
Full Name, Mailing Address, and ZIP Code CSX TRANSPORTATION INC PAC (FKA SEABOARD SYSTEM RAILROAD PAC) 1331 PENNSYLVANIA AVE NW SUITE 580 WASHINGTON DC 20004	Name of Employer CSX TRANSPORTATION INC PAC (FKA SEABOARD SYSTEM RAILROAD PAC) Occupation	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE 714 GREEN VALLEY ROAD GREENSBORO NC 27408	Name of Employer LORILLARD TOBACCO COMPANY PUBLIC AFFAIRS COMMITTEE Occupation	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11C

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**NAME OF COMMITTEE (In Full)
BAYOU LEADER POLITICAL ACTION COMMITTEE**

<p>Full Name, Mailing Address, and ZIP Code NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. POLITICAL ACTION COMMITTEE P O BOX 1417-D49 ALEXANDRIA VA 22313</p>	<p>Name of Employer POLITICAL ACTION COMMITTEE</p>	<p>Date (month, day, year) 05/28/2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 1000.00</p>	
<p>Full Name, Mailing Address, and ZIP Code PHILIP MORRIS COMPANIES INC POLITICAL ACTION COMMITTEE (AKA PHIL-PAC) 120 PARK AVENUE NEW YORK NY 10017</p>	<p>Name of Employer PHILIP MORRIS COMPANIES INC POLITICAL ACTION COMMITTEE (AKA PHIL-PAC)</p>	<p>Date (month, day, year) 05/26/2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date > \$ 1000.00</p>	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

18509.77

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	719
					FOR LINE NUMBER 21B
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) BAYOU LEADER POLITICAL ACTION COMMITTEE					
Full Name, Mailing Address, and ZIP Code Catering By Windows 1125 N. Royal Street Alexandria VA 22314		Purpose of Disbursement In-Kind: Catering: Fed of Am High Sys PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/04/2000	Amount of Each Disbursement This Period 1009.77
Full Name, Mailing Address, and ZIP Code Emily Young Shaw 524 Fort Williams Parkway Alexandria VA 22304		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 447.00
Full Name, Mailing Address, and ZIP Code Crestle Bank P.O. Box 85024 Richmond VA 23285		Purpose of Disbursement Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/15/2000	Amount of Each Disbursement This Period 706.00
Full Name, Mailing Address, and ZIP Code Bell Atlantic Mobile P.O. Box 4008 Silver Spring MD 20914		Purpose of Disbursement Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 115.03
Full Name, Mailing Address, and ZIP Code Cajun Cookout P.O. Box 42 Belle Rose LA 70341		Purpose of Disbursement Cajun Baskets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 170.00
Full Name, Mailing Address, and ZIP Code Emily Young Shaw 524 Fort Williams Parkway Alexandria VA 22304		Purpose of Disbursement ExpReimb: Postage/Parking/OfcSup/Tel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/28/2000	Amount of Each Disbursement This Period 818.03
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					3284.66

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	8 / 9
					FOR LINE NUMBER 23
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (in Full) BAYOU LEADER POLITICAL ACTION COMMITTEE					
Full Name, Mailing Address, and ZIP Code CUBIN FOR CONGRESS INC P.O. BOX 4657 CASPER WY 82804		Purpose of Disbursement (House - WY - 00) In-Kind: FR Svcs: E. Young Shaw Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code NORWOOD FOR CONGRESS P O BOX 499 EVANS GA 30809		Purpose of Disbursement (House - GA - 10) In-Kind: FR Svcs: E. Young Shaw Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code RE-ELECT BRIAN BILBRAY FOR CONGRESS 870 SEACOAST DR #7 IMPERIAL BEACH CA 91932		Purpose of Disbursement (House - CA - 49) In-Kind: FR Svcs: E. Young Shaw Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code Emily Young Shaw 524 Fort Williams Parkway Alexandria VA 22304		Purpose of Disbursement In-Kind: FR Svcs: Cubin Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code Emily Young Shaw 524 Fort Williams Parkway Alexandria VA 22304		Purpose of Disbursement In-Kind: FR Svcs: Norwood Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code Emily Young Shaw 524 Fort Williams Parkway Alexandria VA 22304		Purpose of Disbursement In-Kind: FR Svcs: Bilbray Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/05/2000	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code AMERICAN RENEWAL PAC POST OFFICE BOX 20210 ALEXANDRIA VA 22302		Purpose of Disbursement In-Kind: Catering: Cajun Cookout Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 1800.00
Full Name, Mailing Address, and ZIP Code Cajun Cookout P.O. Box 42 Belle Rose LA 70341		Purpose of Disbursement In-Kind: Catering: American Renewal PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code Cajun Cookout P.O. Box 42 Belle Rose LA 70341		Purpose of Disbursement In-Kind: Catering: Cubin Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 1600.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	9 / 9
					FOR LINE NUMBER
					23
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NAME OF COMMITTEE (In Full) BAYOU LEADER POLITICAL ACTION COMMITTEE					
Full Name, Mailing Address, and ZIP Code CUDIN FOR CONGRESS INC P.O. BOX 4657 CASPER WY 82604		Purpose of Disbursement (House - WY - 01) In-Kind: Catering: Cajun Cookout Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/23/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code Cajun Cookout P.O. Box 42 Belle Rose LA 70341		Purpose of Disbursement In-Kind: Catering: Billbray Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 06/25/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code Cajun Cookout P.O. Box 42 Belle Rose LA 70341		Purpose of Disbursement In-Kind: Catering: Norwood Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/25/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code NORWOOD FOR CONGRESS P O BOX 499 EVANS GA 30809		Purpose of Disbursement (House - GA - 10) In-Kind: Catering: Cajun Cookout Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/25/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code RE-ELECT BRIAN BILBRAY FOR CONGRESS 870 SEACOAST DR #7 IMPERIAL BEACH GA 91932		Purpose of Disbursement (House - GA - 49) In-Kind: Catering: Cajun Cookout Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/25/2000	Amount of Each Disbursement This Period 1600.00
Full Name, Mailing Address, and ZIP Code ASAP Printing & Mailing Co., Inc. 2805 Mt. Vernon Avenue Alexandria VA 22301		Purpose of Disbursement In-Kind: Postage: Tancredo & Fletcher Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/30/2000	Amount of Each Disbursement This Period 400.00
Full Name, Mailing Address, and ZIP Code FLETCHER FOR CONGRESS PO BOX 4703 LEXINGTON KY 40544		Purpose of Disbursement (House - KY - 08) In-Kind: Postage: ASAP Printing & Mailing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/30/2000	Amount of Each Disbursement This Period 200.00
Full Name, Mailing Address, and ZIP Code TANCREDO FOR CONGRESS COMMITTEE INC 5471 S ESTES ST LITTLETON CO 80123		Purpose of Disbursement (House - CO - 06) In-Kind: Postage: ASAP Printing & Mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/30/2000	Amount of Each Disbursement This Period 200.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					7700.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>6-20-07</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jm D</i> PREPARER	<i>6-20-07</i> DATE PREPARED