

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Joseph Cao for Congress

ADDRESS (number and street) PO Box 56156

Check if different than previously reported. (ACC)

New Orleans LA 70156

2. **FEC IDENTIFICATION NUMBER** C00455808

**CITY** STATE ZIP CODE STATE DISTRICT

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

LA 02

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on 11 02 2010 in the State of LA

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

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

Election on in the State of

5. Covering Period 10 01 2010 through 10 13 2010

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 Louis Gurvich Jr.

Signature of Treasurer Electronically Filed by Louis Gurvich Jr. Date 10 21 2010

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Joseph Cao for Congress

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	76841.71	1867533.14
(b) Total Contribution Refunds (from Line 20(d)).....	2400.00	8200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	74441.71	1859333.14
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	177089.61	1567816.85
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	177089.61	1567816.85
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>322380.28</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>3000.00</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Joseph Cao for Congress

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	39812.20	875355.39
(i) Itemized (use Schedule A).....	9279.51	594837.44
(ii) Unitemized.....	49091.71	1470192.83
(iii) TOTAL of contributions from individuals..... ▶	0.00	4300.00
(b) Political Party Committees.....	27750.00	393040.31
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	76841.71	1867533.14
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	9408.26
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	2000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>		
	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>		
	0.00	3535.59
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>		
	76841.71	1882476.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	177089.61	1567816.85
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	68218.67
(b) Of all Other Loans.....	0.00	2000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	70218.67
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2400.00	8200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2400.00	8200.00
21. OTHER DISBURSEMENTS.....	0.00	1477.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	179489.61	1647712.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	425028.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	76841.71
25. SUBTOTAL (add Line 23 and Line 24).....	501869.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	179489.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	322380.28

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

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

FOR LINE NUMBER: PAGE 5 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
FONTENELLE & GOODREAU INSURANCE, LLC

Mailing Address 2315 NORTH WOODLAWN AVE  
SUITE 203

City State Zip Code  
METAIRIE LA 70001

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

**Transaction ID:** A-C20985

Amount of Each Receipt this Period  
500.00

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**B.** Full Name (Last, First, Middle Initial)  
Charles E Fontenelle

Mailing Address 4508 Clearview Parkway  
Suite 200

City State Zip Code  
Metairie LA 70006-2379

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

Name of Employer Occupation  
Fontenelle & Goodreau Ins. Partner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

**Transaction ID:** A-PI41

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Partnership Itemization Memo

**C.** Full Name (Last, First, Middle Initial)  
FONTENELLE & GOODREAU INSURANCE, LLC

Mailing Address 2315 NORTH WOODLAWN AVE  
SUITE 203

City State Zip Code  
METAIRIE LA 70001

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

**Transaction ID:** A-C20986

Amount of Each Receipt this Period  
500.00

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

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

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

FOR LINE NUMBER: PAGE 6 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Darrell Goodreau</p> <p>Mailing Address 2315 NORTH WOODLAWN AVE SUITE 203</p> <p>City State Zip Code <b>METAIRIE LA 70001</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Fontenelle &amp; Goodreau Ins- Insurance urance</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID: A-PI42</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p> <p><b>[MEMO ITEM]</b> Partnership Itemization Memo</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) VTNR Media</p> <p>Mailing Address 14772 Moran Street</p> <p>City State Zip Code <b>Westminster CA 92683-5553</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID: A-C20821</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">300.00</span></p> <p>Contribution from Partner- ship. Partners exceeding reporting threshold itemi- zed as memos.</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Chau Le</p> <p>Mailing Address 14772 Moran Street</p> <p>City State Zip Code <b>Westminster CA 92683-5553</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation VTNR Media Owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID: A-PI40</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">300.00</span></p> <p><b>[MEMO ITEM]</b> Partnership Itemization Memo</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">300.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Leonard Alsfeld</p> <p>Mailing Address 4705 Rebecca Boulevard</p> <p>City State Zip Code Metairie LA 70003-7627</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation FBT Investments, Inc. Stockbroker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">600.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20687</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Philip R Barbaree</p> <p>Mailing Address 6123 Line Avenue</p> <p>City State Zip Code Shreveport LA 71106-2052</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Best Efforts Best Efforts</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20690</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mark A. Beckstrom</p> <p>Mailing Address 330 Stonehaven Drive</p> <p>City State Zip Code Mandeville LA 70471-1116</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Ochsner Clinic/health Care Adminis Ochsner/assoc. Vice President</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20760</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 8 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Edward Boettner</p> <p>Mailing Address 909 POYDRAS ST SUITE 3100</p> <p>City State Zip Code NEW ORLEANS LA 70112</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Hri Properties/developer Historic Restoration Inc./business</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2000.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20983</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bobby Brannon</p> <p>Mailing Address 1412 Papworth Avenue</p> <p>City State Zip Code Metairie LA 70005-1751</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Ochsner Clinic Executive</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">500.00</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20764</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Dickie Brennan</p> <p>Mailing Address 605 CANAL ST</p> <p>City State Zip Code NEW ORLEANS LA 70130</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Palace Cafe Partner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">2338.60</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-I20823</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2338.60</span></p> <p>Inkind: In-Kind Fundraising Costs</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3838.60</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr James Callan</p> <p>Mailing Address 1711 E Dean Road</p> <p>City State Zip Code Milwaukee WI 53217-2410</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation James Callan Inc Real Estate</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20668</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">1500.00</span></p>	

<p><b>B.</b> Full Name (Last, First, Middle Initial) Sue Ellen Canizaro</p> <p>Mailing Address 909 Poydras Street Suite 1700</p> <p>City State Zip Code New Orleans LA 70112-4010</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Homemaker Homemaker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20689</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1400.00</span></p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	

<p><b>C.</b> Full Name (Last, First, Middle Initial) Sue Ellen Canizaro</p> <p>Mailing Address 909 Poydras Street Suite 1700</p> <p>City State Zip Code New Orleans LA 70112-4010</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Homemaker Homemaker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20694</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">1000.00</span></p>
<p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2400.00</span></p>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">2900.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 10 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mr Mark Cannon, DDS

Mailing Address 548 WAYLAND AVE

City State Zip Code  
KENILWORTH IL 60043

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

Name of Employer: Assoc. Dental Spec. Of Long Grove   Occupation: Pediatric Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 150.00

Transaction ID: A-C20627

**B.** Full Name (Last, First, Middle Initial)  
Mrs Mary W Colbert

Mailing Address 100 Christwood Boulevard  
Apt. 242

City State Zip Code  
Covington LA 70433-4604

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

Name of Employer: Retired   Occupation: Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: A-C20688

**C.** Full Name (Last, First, Middle Initial)  
Mr Henry Corey

Mailing Address 80 HEREFORD RD

City State Zip Code  
BRONXVILLE NY 10708

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

Name of Employer: None   Occupation: Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: A-C20739

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 76  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ms Klara Cvitanovich

Mailing Address 4812 Chateau Drive

City State Zip Code  
Metairie LA 70002-1516

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

Name of Employer Self Occupation  
Restauranteur

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20803

Amount of Each Receipt this Period  
500.00

700.00

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

Mailing Address 1046 Annunciation Street

City State Zip Code  
New Orleans LA 70130-3831

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

Name of Employer Con-Tech International Occupation  
President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20685

Amount of Each Receipt this Period  
500.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David Gallo

Mailing Address 19 Swallow St.

City State Zip Code  
New Orleans LA 70124

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

Name of Employer Gallo Mechanical, Llc Occupation  
Ceo

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20693

Amount of Each Receipt this Period  
500.00

1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Tamberly Gray

Mailing Address 575 Woodvine Avenue

City State Zip Code  
Metairie LA 70005-4443

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20802

Amount of Each Receipt this Period  
2400.00

2400.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Walter Gray

Mailing Address P.O. BOX 6202

City State Zip Code  
METAIRIE LA 70009

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

Name of Employer Occupation  
Gray Insurance Executive

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20801

Amount of Each Receipt this Period  
2400.00

4800.00

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

Mailing Address 4708 Caroline Street

City State Zip Code  
Houston TX 77004-5025

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

Name of Employer Occupation  
Self Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20977

Amount of Each Receipt this Period  
500.00

1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Qui V Hoang		Date of Receipt MM / DD / YYYY 10 / 13 / 2010		
	Mailing Address 1846 6th Avenue Apt. C		<b>Transaction ID:</b> A-C20812		
	City Monrovia	State CA	Zip Code 91016-4339	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Best Efforts		Occupation Best Efforts		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Diane Hollis		Date of Receipt MM / DD / YYYY 10 / 13 / 2010		
	Mailing Address 5205 DAVIS DR		<b>Transaction ID:</b> A-C20703		
	City METAIRIE	State LA	Zip Code 70003	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 265.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Russell King		Date of Receipt MM / DD / YYYY 10 / 13 / 2010		
	Mailing Address 4412 ELAN PL		<b>Transaction ID:</b> A-C20779		
	City ANNANDALE	State VA	Zip Code 22003	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Irs		Occupation Info Tech Spec		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 423.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 14 / 76</span> (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Daniela Kmoury</p> <p>Mailing Address 1201 Canal Street Apt. 651</p> <p>City State Zip Code New Orleans LA 70112-2721</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Homemaker Homemaker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0</p> <p><b>Transaction ID:</b> A-C20979</p> <p>Amount of Each Receipt this Period 500.00</p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Diep T Le</p> <p>Mailing Address 13684 Eastbridge Street</p> <p>City State Zip Code Westminster CA 92683-2985</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Best Efforts Best Efforts</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0</p> <p><b>Transaction ID:</b> A-C20809</p> <p>Amount of Each Receipt this Period 200.00</p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Diep T Le</p> <p>Mailing Address 13684 Eastbridge Street</p> <p>City State Zip Code Westminster CA 92683-2985</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Best Efforts Best Efforts</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary    <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 1 0</p> <p><b>Transaction ID:</b> A-C20818</p> <p>Amount of Each Receipt this Period 50.00</p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>750.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Dr Leon Lenoir, Jr.  
Mailing Address 1150 Arnold Avenue  
City Greenville State MS Zip Code 38701-6381  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Doctor  
Receipt For: 2010  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 240.00  
Date of Receipt 10 / 13 / 2010  
Transaction ID: A-C20656  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Anthony Levan  
Mailing Address 2213 Pacific Avenue Apt. D  
City Alameda State CA Zip Code 94501-1453  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2010  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt 10 / 13 / 2010  
Transaction ID: A-C20787  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Rene A Louapre, III, MD  
Mailing Address 2633 Napoleon Avenue Suite 400  
City New Orleans State LA Zip Code 70115-6340  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Physician  
Receipt For: 2010  Primary  General  Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt 10 / 13 / 2010  
Transaction ID: A-C20984  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 425.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Anh Luong

Mailing Address 1014 7th Street

City Morgan City State LA Zip Code 70380-1906

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

Name of Employer Self Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 10 / 13 / 2010  
**Transaction ID: A-C20770**  
 Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Dr Neil J Maki, M.D.

Mailing Address 525 Saint Mary Street

City Thibodaux State LA Zip Code 70301-2627

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

Name of Employer Self Employed Occupation Doctor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 986.00

Date of Receipt 10 / 13 / 2010  
**Transaction ID: A-C20625**  
 Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Albert Marchal

Mailing Address 279 AUDUBON BLVD

City NEW ORLEANS State LA Zip Code 70125

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

Name of Employer Flood Protection Alliance Occupation Director

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2010  
**Transaction ID: A-C20759**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1600.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs Loretta Martin		Date of Receipt
	Mailing Address 4605 Page Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 1 0
	City	State	Zip Code
	Metairie	LA	70003-1127
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C20980
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Suzanne Mcdonald		Date of Receipt
	Mailing Address 580 Harmon Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 1 0
	City	State	Zip Code
	Birmingham	MI	48009-3820
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C20781
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Louise H Moffett		Date of Receipt
	Mailing Address 6145 ST. CHARLES AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 3 / 2 0 1 0
	City	State	Zip Code
	NEW ORLEANS	LA	70118
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A-C20686
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1500.00
		<input type="text"/> 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ms Alice B Munger

Mailing Address 2729 CONSTANCE ST

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20701

Amount of Each Receipt this Period  
100.00

3050.00

**B.** Full Name (Last, First, Middle Initial)  
Howard Nelson, JR, MD

Mailing Address 2211 PRYTANIA ST

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
Self Doctor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20692

Amount of Each Receipt this Period  
1000.00

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Don Nguyen

Mailing Address 1139 Prospect Avenue  
Apt. 4A

City State Zip Code  
Brooklyn NY 11218-1149

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

Name of Employer Occupation  
City of New York Lawyer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20730

Amount of Each Receipt this Period  
1500.00

1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 76  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Khang Nguyen

Mailing Address 112 Fellsway W

City State Zip Code  
Medford MA 02155-2707

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20599

Amount of Each Receipt this Period  
250.00

250.00

**B.** Full Name (Last, First, Middle Initial)  
Carolyn Oliver

Mailing Address 625 Saint Charles Avenue  
Apt. PHA

City State Zip Code  
New Orleans LA 70130-3400

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

Name of Employer At&t Occupation President - LA Operations

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20768

Amount of Each Receipt this Period  
1000.00

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs Glenna Osnos

Mailing Address 6606 RIVERCREST CT

City State Zip Code  
BETHESDA MD 20816

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

Name of Employer None Occupation Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20646

Amount of Each Receipt this Period  
100.00

350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven Pettus</p> <p>Mailing Address 605 Canal Street</p> <p>City State Zip Code New Orleans LA 70130-2307</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Dickie Brennan Restaurants Restaurant Management</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">2813.60</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-I20822</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">2338.60</span></p> <p>Inkind: In-Kind Fundraising Cost</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Lien K Pham</p> <p>Mailing Address 955 Pleasant Street</p> <p>City State Zip Code Bridgewater MA 02324-2300</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Self Dry Cleaners</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20594</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">400.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms Sylvia Porteous</p> <p>Mailing Address 1550 2nd Street Apt. 5J</p> <p>City State Zip Code New Orleans LA 70130-5943</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Homemaker Homemaker</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">600.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 3 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> A-C20990</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">500.00</span></p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">3238.60</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: block; height: 20px;"></span>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Ms Beatrice R Putnam

Mailing Address 225 PUTNAM RD

City NEWBURY State VT Zip Code 05051

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20719**  
 Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick Quinlan

Mailing Address 1514 Jefferson Highway

City Jefferson State LA Zip Code 70121-2429

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

Name of Employer Ochsner Health System Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20736**  
 Amount of Each Receipt this Period: 500.00

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

Mailing Address 1514 Jefferson Highway

City Jefferson State LA Zip Code 70121-2429

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

Name of Employer Ochsner Health System Occupation CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20769**  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Patricia F Strachan  
Mailing Address 1134 FIRST ST  
City NEW ORLEANS State LA Zip Code 70130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Investments  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt M M / D D / Y Y Y Y  
10 / 13 / 2010  
Transaction ID: A-C20771  
Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Patricia F Strachan  
Mailing Address 1134 FIRST ST  
City NEW ORLEANS State LA Zip Code 70130  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Investments  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt M M / D D / Y Y Y Y  
10 / 13 / 2010  
Transaction ID: A-C20989  
Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Leo Straus  
Mailing Address 302 ESTATE LN  
City BROOKVILLE State OH Zip Code 45309  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 245.00  
Date of Receipt M M / D D / Y Y Y Y  
10 / 13 / 2010  
Transaction ID: A-C20762  
Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 235.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 24 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Vinnie Than

Mailing Address 100 Newmarket Square

City Boston State MA Zip Code 02118-2619

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

Name of Employer Self Occupation Auto Dealer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20607**  
 Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
Warner Thomas

Mailing Address 2030 PALMER AVE

City NEW ORLEANS State LA Zip Code 70118

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

Name of Employer Ochsner Hospital/chief Ad- ministrat Occupation Healthcare Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20765**  
 Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Linh T Tran

Mailing Address 4030 Hunt Road

City Fairfax State VA Zip Code 22032-1458

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

Name of Employer Self Occupation Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 13 / 2010  
**Transaction ID: A-C20711**  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Loc Tran

Mailing Address 57 Winthrop Street

City Milton State MA Zip Code 02186-1546

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 13 / 2010

Transaction ID: A-C20988

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Tuan Q Tran

Mailing Address 291 Ashmont Street

City Dorchester Center State MA Zip Code 02124-3805

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 13 / 2010

Transaction ID: A-C20605

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Tuan Q Tran

Mailing Address 291 Ashmont Street

City Dorchester Center State MA Zip Code 02124-3805

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 13 / 2010

Transaction ID: A-C20614

Amount of Each Receipt this Period

300.00

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

2400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 76

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Daniel D Truong

Mailing Address 9422 Darrow Drive

City State Zip Code  
Huntington Beach CA 92646-7233

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

Name of Employer Self Occupation Doctor

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: A-C20819

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Hieu Vinh

Mailing Address 10 Margaret Road

City State Zip Code  
Randolph MA 02368-3994

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: A-C20991

Amount of Each Receipt this Period

2100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr Louis Washington

Mailing Address 1105 Lee Street

City State Zip Code  
Marrero LA 70072-2347

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

Name of Employer Income Tax Service Occupation Accountant

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

Transaction ID: A-C20635

Amount of Each Receipt this Period

100.00

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

2700.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 76  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Virginia Weinmann

Mailing Address 601 POYDRAS ST  
SUITE 2690

City State Zip Code  
NEW ORLEANS LA 70130

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID: A-C20982**

Amount of Each Receipt this Period  
250.00

750.00

**B.** Full Name (Last, First, Middle Initial)  
Lucille Whitley

Mailing Address 70 ENGLISH TURN

City State Zip Code  
NEW ORLEANS LA 70131

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID: A-C20767**

Amount of Each Receipt this Period  
1000.00

2265.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

**TOTAL** This Period (last page this line number only) ..... ► **39812.20**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Accenture, Inc. PAC

Mailing Address 800 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20006-2716

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
10 / 13 / 2010

**Transaction ID:** A-C20976

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AFLAC PAC

Mailing Address Worldwide Headquarters  
1932 Wynnton Road

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
10 / 13 / 2010

**Transaction ID:** A-C20756

Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
American Commercial Lines Inc. PAC

Mailing Address 1701 East Market St

City Jeffersonville State IN Zip Code 47130

FEC ID number of contributing federal political committee. **C** C00418269

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
10 / 13 / 2010

**Transaction ID:** A-C20772

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 (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 / 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 Pennsylvania Ave, NW, Ste 560  
Suite 560

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20992

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Free and Strong America PAC

Mailing Address PO Box 79226

City Waverley State MA Zip Code 02479-0226

FEC ID number of contributing federal political committee. **C** C00449280

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20731

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BOEHNER

Mailing Address 7908 Cincinnati Dayton Road  
Suite I

City West Chester State OH Zip Code 45069

FEC ID number of contributing federal political committee. **C** C00237198

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20978

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 6500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jobs, Economy and Budget Fund

Mailing Address 7315 Wisconsin Avenue  
Suite 310

City State Zip Code  
Bethesda MD 20814-3202

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20691

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
Judy Biggert for Congress

Mailing Address PO Box 637

City State Zip Code  
Hinsdale IL 60522-0637

FEC ID number of contributing federal political committee. **C** C00330241

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20987

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
Lan Nguyen for Board of Education

Mailing Address 14560 Magnolia Street  
Floor 1

City State Zip Code  
Westminster CA 92683-4791

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 1 0

**Transaction ID:** A-C20820

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
Linder for Congress  
Mailing Address PO Box 4026  
City Duluth State GA Zip Code 30096-0063  
FEC ID number of contributing federal political committee. **C** C00255976  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt: 10 / 13 / 2010  
Transaction ID: A-C20994  
Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
National Association of Home Builders PAC  
Mailing Address 1201 15th Street NW  
City Washington State DC Zip Code 20005-2842  
FEC ID number of contributing federal political committee. **C** C30001366  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00  
Date of Receipt: 10 / 13 / 2010  
Transaction ID: A-C20773  
Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
National Federation of Independent Business PAC  
Mailing Address 1201 F Street NW Suite 200  
City Washington State DC Zip Code 20004-1221  
FEC ID number of contributing federal political committee. **C** C00101105  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 10 / 13 / 2010  
Transaction ID: A-C20732  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

**A.** Full Name (Last, First, Middle Initial)  
The Dow Chemical Company Employees PAC

Mailing Address 2030 Dow Center

City Midland State MI Zip Code 48674-0001

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID:** A-C20993  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
The GlaxoSmithKline PAC

Mailing Address Five Moore Dr

City Research Triangle State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID:** A-C20758  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
The NEA Fund for Children & Public Education PAC

Mailing Address 1201 16th Street NW Suite 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 13 / 2010  
**Transaction ID:** A-C20995  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 76
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Tidewater Inc. PAC		Date of Receipt
	Mailing Address 601 Poydras Street Suite 1900		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	New Orleans	LA	70130-6040
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
	Name of Employer	Occupation	
Receipt For: 2010	Election Cycle-to-Date ▼		Transaction ID: A-C20996
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="5000.00"/>	Amount of Each Receipt this Period
<input type="checkbox"/> Other (specify) ▼			<input type="text" value="4000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="27750.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>ASAP GRAPHICS</b> <hr/> Mailing Address <b>500 SW 21ST TER SUITE B-102</b> <hr/> City <b>FORT LAUDERDALE</b> State <b>FL</b> Zip Code <b>33312</b> <hr/> Purpose of Disbursement Paraphernalia: Signs Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div> Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20849 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">2010</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">4003.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>ASAP GRAPHICS</b> <hr/> Mailing Address <b>500 SW 21ST TER SUITE B-102</b> <hr/> City <b>FORT LAUDERDALE</b> State <b>FL</b> Zip Code <b>33312</b> <hr/> Purpose of Disbursement Paraphernalia: Signs Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div> Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20916 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">2010</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1674.57</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>ASAP GRAPHICS</b> <hr/> Mailing Address <b>500 SW 21ST TER SUITE B-102</b> <hr/> City <b>FORT LAUDERDALE</b> State <b>FL</b> Zip Code <b>33312</b> <hr/> Purpose of Disbursement Paraphernalia: Signs Candidate Name <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div> Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20939 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">01</div> / <div style="border: 1px solid black; padding: 2px;">2010</div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">3840.50</div>

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

**9518.07**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Brennan's Printing <hr/> Mailing Address 5612 Blessey Street <hr/> City Harahan State LA Zip Code 70123-5552 <hr/> Purpose of Disbursement Fundraising: Printing Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20856 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 584.26
B.	Full Name (Last, First, Middle Initial) Continental Airlines <hr/> Mailing Address 3500 N Terminal Road <hr/> City Houston State TX Zip Code 77032-5573 <hr/> Purpose of Disbursement Travel: Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20926 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 231.30
C.	Full Name (Last, First, Middle Initial) Continental Airlines <hr/> Mailing Address 3500 N Terminal Road <hr/> City Houston State TX Zip Code 77032-5573 <hr/> Purpose of Disbursement Travel: Travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20930 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 231.30

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

1046.86

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Continental Airlines  Mailing Address 3500 N Terminal Road  City Houston State TX Zip Code 77032-5573  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20940 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 206.30  Category/Type 002
B.	Full Name (Last, First, Middle Initial) Documart  Mailing Address 5624 Citrus Boulevard  City New Orleans State LA Zip Code 70123-5507  Purpose of Disbursement Paraphernalia: Printing Costs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20915 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 1463.47  Category/Type 006
C.	Full Name (Last, First, Middle Initial) Documart  Mailing Address 5624 Citrus Boulevard  City New Orleans State LA Zip Code 70123-5507  Purpose of Disbursement Paraphernalia: Flyers Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20925 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 369.75  Category/Type 006

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

2039.52

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car  Mailing Address 6401 Wesley Street  City Greenville State TX Zip Code 75402-7365  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20919 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 56.45  002 Category/ Type
B.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car  Mailing Address 6401 Wesley Street  City Greenville State TX Zip Code 75402-7365  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20922 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 56.45  002 Category/ Type
C.	Full Name (Last, First, Middle Initial) Facebook  Mailing Address 156 University Avenue  City Palo Alto State CA Zip Code 94301-1688  Purpose of Disbursement Advertising: Electronic Media Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20946 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 516.90  004 Category/ Type

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

**629.80**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>FEDERAL EXPRESS</b>  Mailing Address 762 Saint Charles Avenue  City New Orleans State LA Zip Code 70130-3714 Purpose of Disbursement Administrative/Salary/Overhead: Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20931 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 28.94  001 Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>FEDERAL EXPRESS</b>  Mailing Address 762 Saint Charles Avenue  City New Orleans State LA Zip Code 70130-3714 Purpose of Disbursement Administrative/Salary/Overhead: Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20934 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 21.29  001 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FEDERAL EXPRESS</b>  Mailing Address 762 Saint Charles Avenue  City New Orleans State LA Zip Code 70130-3714 Purpose of Disbursement Paraphernalia: Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20936 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 257.05  006 Category/Type

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

**307.28**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Hertz Rent A Car  Mailing Address 4616 Veterans Blvd  City Metairie State LA Zip Code 70006  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20945 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 180.24
<b>B.</b>	Full Name (Last, First, Middle Initial) KIM SON RESTAURANT  Mailing Address 12750 SOUTH FREEWAY  City STAFFORD State TX Zip Code 77477  Purpose of Disbursement meals and Dinners Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20949 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 22.89
<b>C.</b>	Full Name (Last, First, Middle Initial) KT Printing  Mailing Address 10515 Bellaire Boulevard  City Houston State TX Zip Code 77072-5234  Purpose of Disbursement Fundraising: Printing Costs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20951 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 159.90

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

**363.03**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) New Orleans Saints <hr/> Mailing Address 5800 Airline Drive <hr/> City Metairie State LA Zip Code 70003-3876 <hr/> Purpose of Disbursement Fundraising: Fundraising Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20954 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 522.45
B.	Full Name (Last, First, Middle Initial) OFFICE DEPOT <hr/> Mailing Address 1429 Saint Charles Avenue <hr/> City New Orleans State LA Zip Code 70130-4443 <hr/> Purpose of Disbursement Fundraising: Fundraising Costs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20921 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 160.13
C.	Full Name (Last, First, Middle Initial) OFFICE DEPOT <hr/> Mailing Address 1429 Saint Charles Avenue <hr/> City New Orleans State LA Zip Code 70130-4443 <hr/> Purpose of Disbursement Office Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20948 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 16.96

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	699.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) OFFICE DEPOT  Mailing Address 1429 Saint Charles Avenue  City New Orleans State LA Zip Code 70130-4443  Purpose of Disbursement Office Expense Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20952 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 14.82  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) OneBox Call  Mailing Address 6922 Hollywood Boulevard  City Hollywood State CA Zip Code 90028-6117  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20923 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 79.95  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) OneBox Call  Mailing Address 6922 Hollywood Boulevard  City Hollywood State CA Zip Code 90028-6117  Purpose of Disbursement Telephone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20947 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 79.95  001 Category/ Type

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

174.72

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) OneBox Call <hr/> Mailing Address 6922 Hollywood Boulevard <hr/> City Hollywood State CA Zip Code 90028-6117 <hr/> Purpose of Disbursement Telephone Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20961 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      1 0 / 0 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">79.95</div>
B.	Full Name (Last, First, Middle Initial) Ouisies Table <hr/> Mailing Address 3939 San Felipe Street <hr/> City Houston State TX Zip Code 77027-3928 <hr/> Purpose of Disbursement Fundraising: Fundraising Costs Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">003</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20920 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      1 0 / 0 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">507.29</div>
C.	Full Name (Last, First, Middle Initial) Renaissance Hotel <hr/> Mailing Address 111 E Ocean Boulevard <hr/> City Long Beach State CA Zip Code 90802-4794 <hr/> Purpose of Disbursement Travel: Travel Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">002</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20918 Date of Disbursement <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      1 0 / 0 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">117.90</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">705.14</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20855 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 57.16	
B.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20924 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 23.50	
C.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20937 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 53.70	

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

**134.36**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20944 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period  12.00
B.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20958 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period  8.75
C.	Full Name (Last, First, Middle Initial) SHERLOCK AND ASSOCIATES  Mailing Address 419 The Parkway # 168  City Greer State SC Zip Code 29650-4522  Purpose of Disbursement Fundraising: Fundraising Fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20848 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period  4000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4020.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: B-E-20960 Date of Disbursement
	Mailing Address 1250 H Street NW # 100	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20005-3952	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Expense	<input type="text" value="150.60"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Thrifty Car Rental	Transaction ID: B-E-20917 Date of Disbursement
	Mailing Address 1675 Airline Drive	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Kenner State LA Zip Code 70062-6942	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: Travel	<input type="text" value="75.32"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Thrifty Car Rental	Transaction ID: B-E-20942 Date of Disbursement
	Mailing Address 1675 Airline Drive	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Kenner State LA Zip Code 70062-6942	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel: Travel	<input type="text" value="183.84"/>
	Candidate Name	<input type="text" value="002"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="409.76"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Thrifty Car Rental</p> <p>Mailing Address 1675 Airline Drive</p> <p>City Kenner State LA Zip Code 70062-6942</p> <p>Purpose of Disbursement Travel: Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20957</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 75.32</p> <p>Category/Type 002</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US POSTMASTER</p> <p>Mailing Address LOYOLA AVE</p> <p>City NEW ORLEANS State LA Zip Code 70130</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20850</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 79.64</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) US POSTMASTER</p> <p>Mailing Address LOYOLA AVE</p> <p>City NEW ORLEANS State LA Zip Code 70130</p> <p>Purpose of Disbursement Fundraising: Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20935</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 352.00</p> <p>Category/Type 003</p>

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

506.96

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Transaction ID: B-E-20953  
Date of Disbursement

Mailing Address LOYOLA AVE

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

City NEW ORLEANS State LA Zip Code 70130

Amount of Each Disbursement this Period

440.00
--------

Purpose of Disbursement  
Fundraising: Postage

003
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
WILLIAM VANDERBROOK CPA

Transaction ID: B-E-20851  
Date of Disbursement

Mailing Address 2900 Clearview Parkway  
Suite 206

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

City Metairie State LA Zip Code 70006-6532

Amount of Each Disbursement this Period

5015.00
---------

Purpose of Disbursement  
Accounting Services

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Yellow Cab

Transaction ID: B-E-20928  
Date of Disbursement

Mailing Address 1636 Bladensburg Road NE

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

City Washington State DC Zip Code 20002-1804

Amount of Each Disbursement this Period

40.00
-------

Purpose of Disbursement  
Travel: Travel

002
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

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

5495.00
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrea Brawner <hr/> Mailing Address 3401 Nashville Avenue <hr/> City New Orleans State LA Zip Code 70125-4747 <hr/> Purpose of Disbursement Campaign Worker Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20846 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Byron Clay <hr/> Mailing Address 617 Plymouth Drive <hr/> City La Place State LA Zip Code 70068-2368 <hr/> Purpose of Disbursement Campaign Worker Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20847 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 1250.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Rico Clayton <hr/> Mailing Address 5518 Marigny Street <hr/> City New Orleans State LA Zip Code 70122-5220 <hr/> Purpose of Disbursement Campaign Worker Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20854 Date of Disbursement 10 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 50.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Sandra Duplesis</p> <p>Mailing Address 4602 Eastern Street</p> <p>City New Orleans State LA Zip Code 70122-6124</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-E-20853</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Marlon Favorite</p> <p>Mailing Address 417 Westwood Drive</p> <p>City Marrero State LA Zip Code 70072-1212</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-E-20857</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Melikle D Favorite</p> <p>Mailing Address 714 Westwood Ave</p> <p>City Marrero State LA Zip Code 70072</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B-E-20858</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="975.00"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) David Huguenel, Jr.  Mailing Address 41 Oak Avenue  City Harahan State LA Zip Code 70123-5039  Purpose of Disbursement Campaign Worker Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20844 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 2000.00  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Brandt Lewis  Mailing Address 1443 Brightside Drive Apt. 912  City Baton Rouge State LA Zip Code 70820-4817  Purpose of Disbursement Campaign Worker Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20845 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 750.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Rafael Perales  Mailing Address 7170 Deanne Street  City New Orleans State LA Zip Code 70126-2540  Purpose of Disbursement Campaign Worker Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20852 Date of Disbursement 10 / 01 / 2010  Amount of Each Disbursement this Period 100.00  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Stephen Peychaud</p> <p>Mailing Address 1516 Governor Nicholls Street</p> <p>City New Orleans State LA Zip Code 70116-2216</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20843</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mrs Ruth Sherlock</p> <p>Mailing Address 23 Collier Lane</p> <p>City Greer State SC Zip Code 29650-4163</p> <p>Purpose of Disbursement Travel: Mileage Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20962</p> <p>Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 323.39</p> <p>Category/Type 002</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ARX Mobile</p> <p>Mailing Address 2000 Massachusetts Avenue NW Suite 200</p> <p>City Washington State DC Zip Code 20036-1014</p> <p>Purpose of Disbursement Advertising: Website Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20861</p> <p>Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>Category/Type 004</p>

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

2623.39

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Shell Oil  Mailing Address 3200 Veterans Blvd  City Metairie State LA Zip Code 70002  Purpose of Disbursement Travel: Travel Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20859 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 1 0  Amount of Each Disbursement this Period 123.47  Category/Type 002
B.	Full Name (Last, First, Middle Initial) Washington Political Group  Mailing Address 1400 Buford Highway Suite G7  City Sugar Hill State GA Zip Code 30518-8727  Purpose of Disbursement Campaign Strategy Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20860 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 1 0  Amount of Each Disbursement this Period 3203.34  Category/Type 001
C.	Full Name (Last, First, Middle Initial) Andrea Brawner  Mailing Address 3401 Nashville Avenue  City New Orleans State LA Zip Code 70125-4747  Purpose of Disbursement Travel: Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20863 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 1 0  Amount of Each Disbursement this Period 104.27  Category/Type 002

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

**3431.08**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.

Full Name (Last, First, Middle Initial)  
Stephen Peychaud

Transaction ID: B-E-20862  
Date of Disbursement

Mailing Address 1516 Governor Nicholls Street

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	1	0

City State Zip Code  
New Orleans LA 70116-2216

Amount of Each Disbursement this Period

287.80
--------

Purpose of Disbursement  
Travel: Mileage Reimbursement

002

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
ANDREA'S RESTAURANT

Transaction ID: B-E-20864  
Date of Disbursement

Mailing Address 3100 19TH ST

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

City State Zip Code  
METAIRIE LA 70002

Amount of Each Disbursement this Period

825.00
--------

Purpose of Disbursement  
Fundraising: Fundraising Costs

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Aristotle International

Transaction ID: B-E-20868  
Date of Disbursement

Mailing Address 205 Pennsylvania Avenue SE

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

City State Zip Code  
Washington DC 20003-1164

Amount of Each Disbursement this Period

1800.00
---------

Purpose of Disbursement  
Computer Expenses

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

2912.80
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TOTAL This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) <b>MDI IMAGING &amp; MAIL</b> Mailing Address 21955 CASCADES PKWY City DULLES State VA Zip Code 20166 Purpose of Disbursement Fundraising: Direct Mail Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20867 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 7010.00 Category/Type 003
B.	Full Name (Last, First, Middle Initial) <b>OFFICE DEPOT</b> Mailing Address 1429 Saint Charles Avenue City New Orleans State LA Zip Code 70130-4443 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20865 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 164.75 Category/Type 001
C.	Full Name (Last, First, Middle Initial) <b>PMI</b> Mailing Address PO Box 7670 City Arlington State VA Zip Code 22207-0670 Purpose of Disbursement Advertising: Marketing Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20866 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 1750.00 Category/Type 004

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8924.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Wal-Mart Mailing Address 8712 Veterans Blvd City Metairie State LA Zip Code 70002 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20869 Date of Disbursement 10 / 07 / 2010 Amount of Each Disbursement this Period 403.00 Category/Type: 001
B.	Full Name (Last, First, Middle Initial) Bonza Screen Graphics Mailing Address 1716 Franklin Avenue City Gretna State LA Zip Code 70053-3403 Purpose of Disbursement Paraphernalia: Bumper Stickers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20870 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 1723.69 Category/Type: 006
C.	Full Name (Last, First, Middle Initial) Brennan's Printing Mailing Address 5612 Blessey Street City Harahan State LA Zip Code 70123-5552 Purpose of Disbursement Fundraising: Direct Mail Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20877 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 14398.00 Category/Type: 003

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

**16524.69**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Brennan's Printing Mailing Address 5612 Blessey Street City Harahan State LA Zip Code 70123-5552 Purpose of Disbursement Fundraising: Direct Mail Costs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20884 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 17694.99 003 Category/ Type
B.	Full Name (Last, First, Middle Initial) COX MEDIA Mailing Address 1250 POYDRAS ST SUITE 1000 City NEW ORLEANS State LA Zip Code 70113 Purpose of Disbursement Advertising: TV Ads Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20968 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 9850.00 004 Category/ Type
C.	Full Name (Last, First, Middle Initial) Entergy Mailing Address PO Box 64001 City New Orleans State LA Zip Code 70164-4001 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20879 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 329.23 001 Category/ Type

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

27874.22

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) First NBC Bank Mailing Address 4920 Veterans Blvd City Metairie State LA Zip Code 70006 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20889 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 15.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Monogram Express Mailing Address 131 Gateway Drive Suite A City Brandon State MS Zip Code 39042-3097 Purpose of Disbursement Paraphernalia: T-Shirts Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20878 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 845.53 006 Category/ Type
C.	Full Name (Last, First, Middle Initial) OFFICE DEPOT Mailing Address 1429 Saint Charles Avenue City New Orleans State LA Zip Code 70130-4443 Purpose of Disbursement Office Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20883 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 11.33 001 Category/ Type

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

**871.86**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.

Full Name (Last, First, Middle Initial)  
WDSU TV

Mailing Address 846 HOWARD AVE

City NEW ORLEANS State LA Zip Code 70113

Purpose of Disbursement  
Advertising: TV Ads  
Candidate Name

004  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B-E-20975  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

5850.00

B.

Full Name (Last, First, Middle Initial)  
WGNO TV

Mailing Address ONE GALLERIA BVD

City METAIRIE State LA Zip Code 70001

Purpose of Disbursement  
Advertising: TV Ads  
Candidate Name

004  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B-E-20973  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

2945.00

C.

Full Name (Last, First, Middle Initial)  
WNOL TV

Mailing Address ONE GALLERIA BLVD

City METAIRIE State LA Zip Code 70001

Purpose of Disbursement  
Advertising: TV Ads  
Candidate Name

004  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: B-E-20971  
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

660.00

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

9455.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) WQUE-FM <hr/> Mailing Address 929 Howard Avenue <hr/> City New Orleans State LA Zip Code 70113-1148 <hr/> Purpose of Disbursement Advertising: Radio Ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20966 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 2063.00
<b>B.</b>	Full Name (Last, First, Middle Initial) WRNO-FM <hr/> Mailing Address 929 Howard Avenue <hr/> City New Orleans State LA Zip Code 70113-1148 <hr/> Purpose of Disbursement Advertising: Radio Ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20964 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1970.00
<b>C.</b>	Full Name (Last, First, Middle Initial) WUPL-TV <hr/> Mailing Address 1024 N Rampart Street <hr/> City New Orleans State LA Zip Code 70116-2406 <hr/> Purpose of Disbursement Advertising: TV ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20970 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 575.00

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

**4608.00**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 62 / 76

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) WVUE TV <hr/> Mailing Address 1025 JEFFERSON DAVIS PKWY <hr/> City NEW ORLEANS State LA Zip Code 70125 <hr/> Purpose of Disbursement Advertising: TV Ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20969 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 19250.00
<b>B.</b>	Full Name (Last, First, Middle Initial) WWL TV <hr/> Mailing Address 1024 RAMPART ST <hr/> City NEW ORLEANS State LA Zip Code 70116 <hr/> Purpose of Disbursement Advertising: TV Ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20972 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 1225.00
<b>C.</b>	Full Name (Last, First, Middle Initial) WWL TV <hr/> Mailing Address 1024 RAMPART ST <hr/> City NEW ORLEANS State LA Zip Code 70116 <hr/> Purpose of Disbursement Advertising: TV Ads Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20974 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0	<b>Amount of Each Disbursement this Period</b> 14700.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	35175.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>WWL-AM &amp; FM</b>	<b>Transaction ID:</b> B-E-20963 Date of Disbursement 10 / 08 / 2010	
	Mailing Address 400 Poydras Street Suite 1000		
	City New Orleans State LA Zip Code 70130-3250	Amount of Each Disbursement this Period 4800.00	
	Purpose of Disbursement Advertising: Radio Ads Candidate Name	004 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>WYLD-FM</b>	<b>Transaction ID:</b> B-E-20965 Date of Disbursement 10 / 08 / 2010	
	Mailing Address 929 Howard Avenue		
	City New Orleans State LA Zip Code 70113-1148	Amount of Each Disbursement this Period 3115.00	
	Purpose of Disbursement Advertising: Radio Ads Candidate Name	004 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>Rico Clayton</b>	<b>Transaction ID:</b> B-E-20873 Date of Disbursement 10 / 08 / 2010	
	Mailing Address 5518 Marigny Street		
	City New Orleans State LA Zip Code 70122-5220	Amount of Each Disbursement this Period 50.00	
	Purpose of Disbursement Campaign Worker Candidate Name	001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7965.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.

Full Name (Last, First, Middle Initial)  
Rico Clayton

Transaction ID: B-E-20882  
Date of Disbursement

Mailing Address 5518 Marigny Street

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

City State Zip Code  
New Orleans LA 70122-5220

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Worker

001
Category/ Type

25.00
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Sandra Duplessis

Transaction ID: B-E-20872  
Date of Disbursement

Mailing Address 4602 Eastern Street

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

City State Zip Code  
New Orleans LA 70122-6124

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Worker

001
Category/ Type

50.00
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Sandra Duplessis

Transaction ID: B-E-20881  
Date of Disbursement

Mailing Address 4602 Eastern Street

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

City State Zip Code  
New Orleans LA 70122-6124

Amount of Each Disbursement this Period

Purpose of Disbursement  
Campaign Worker

001
Category/ Type

25.00
-------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

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

100.00
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TOTAL This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Marlon Favorite</p> <p>Mailing Address 417 Westwood Drive</p> <p>City Marrero State LA Zip Code 70072-1212</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20876</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">200.00</td> </tr> </table> <p>001 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	8	/	2	0	1	0	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	8	/	2	0	1	0													
200.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Melikle D Favorite</p> <p>Mailing Address 714 Westwood Ave</p> <p>City Marrero State LA Zip Code 70072</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20875</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">975.00</td> </tr> </table> <p>001 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	8	/	2	0	1	0	975.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	8	/	2	0	1	0													
975.00																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Rafael Perales</p> <p>Mailing Address 7170 Deanne Street</p> <p>City New Orleans State LA Zip Code 70126-2540</p> <p>Purpose of Disbursement Campaign Worker</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20871</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">100.00</td> </tr> </table> <p>001 Category/ Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	8	/	2	0	1	0	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	8	/	2	0	1	0													
100.00																						

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

<b>1275.00</b>
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Forward Motion</p> <p>Mailing Address 6720 N 31st Avenue</p> <p>City Omaha State NE Zip Code 68112-3008</p> <p>Purpose of Disbursement Advertising: Production Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20898</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 2926.30</p> <p>004 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Forward Motion</p> <p>Mailing Address 6720 N 31st Avenue</p> <p>City Omaha State NE Zip Code 68112-3008</p> <p>Purpose of Disbursement Advertising: Production Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20899</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1175.41</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Priceline.com</p> <p>Mailing Address 800 Connecticut Avenue</p> <p>City Norwalk State CT Zip Code 06854-1631</p> <p>Purpose of Disbursement Travel: Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B-E-20897</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 539.80</p> <p>002 Category/ Type</p>

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

4641.51

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Spears Consulting Group  Mailing Address 132 N Cortez Street Suite A  City New Orleans State LA Zip Code 70119-5218  Purpose of Disbursement Advertising: Newspaper Ad Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20894 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  725.00
<b>B.</b>	Full Name (Last, First, Middle Initial) The Brylski Company  Mailing Address 3418 Coliseum Street  City New Orleans State LA Zip Code 70115-2427  Purpose of Disbursement Campaign Strategy Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20895 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  4367.59
<b>C.</b>	Full Name (Last, First, Middle Initial) Adrian Bruneau  Mailing Address 141 Robert E Lee Boulevard Suite 206  City New Orleans State LA Zip Code 70124-2534  Purpose of Disbursement Grass Roots Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B-E-20900 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 1 0	Amount of Each Disbursement this Period  1500.00

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

6592.59

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Rico Clayton Mailing Address 5518 Marigny Street City New Orleans State LA Zip Code 70122-5220 Purpose of Disbursement Campaign Worker Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20904 Date of Disbursement 10 / 11 / 2010 Amount of Each Disbursement this Period 75.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Sandra Duplessis Mailing Address 4602 Eastern Street City New Orleans State LA Zip Code 70122-6124 Purpose of Disbursement Campaign Worker Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20903 Date of Disbursement 10 / 11 / 2010 Amount of Each Disbursement this Period 75.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Dana Hansel Mailing Address 1 Garden Lane City New Orleans State LA Zip Code 70124-1024 Purpose of Disbursement Fundraising: Fundraising Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20905 Date of Disbursement 10 / 11 / 2010 Amount of Each Disbursement this Period 1740.86 003 Category/ Type

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

1890.86

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Myron Katz  Mailing Address 302 Walnut Street  City New Orleans State LA Zip Code 70118-4926  Purpose of Disbursement Office Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20892 Date of Disbursement 10 / 11 / 2010  Amount of Each Disbursement this Period 250.00  Category/Type 001
B.	Full Name (Last, First, Middle Initial) Dr. Natchez Morice  Mailing Address 12A Westbank Expressway  City Gretna State LA Zip Code 70053-3659  Purpose of Disbursement Office Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20890 Date of Disbursement 10 / 11 / 2010  Amount of Each Disbursement this Period 700.00  Category/Type 001
C.	Full Name (Last, First, Middle Initial) Rafael Perales  Mailing Address 7170 Deanne Street  City New Orleans State LA Zip Code 70126-2540  Purpose of Disbursement Travel: Mileage Reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20901 Date of Disbursement 10 / 11 / 2010  Amount of Each Disbursement this Period 72.00  Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1022.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Rafael Perales <hr/> Mailing Address 7170 Deanne Street <hr/> City New Orleans State LA Zip Code 70126-2540 <hr/> Purpose of Disbursement Campaign Worker Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20902 Date of Disbursement 10 / 11 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">150.00</div>
B.	Full Name (Last, First, Middle Initial) Charles Sincero <hr/> Mailing Address 920 Minden Street <hr/> City Kenner State LA Zip Code 70062-6838 <hr/> Purpose of Disbursement Travel: Mileage Reimbursement Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">002</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20893 Date of Disbursement 10 / 11 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">70.00</div>
C.	Full Name (Last, First, Middle Initial) First NBC Bank <hr/> Mailing Address 4920 Veterans Blvd <hr/> City Metairie State LA Zip Code 70006 <hr/> Purpose of Disbursement Bank Charges Candidate Name <span style="float: right; border: 1px solid black; padding: 2px;">001</span> Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B-E-20906 Date of Disbursement 10 / 12 / 2010 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">82.12</div>

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

**302.12**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Grand Garden Restaurant  Mailing Address 8894 Bolsa Avenue  City Westminster State CA Zip Code 92683-5436  Purpose of Disbursement Fundraising: Fundraising Costs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-E-20909 Date of Disbursement 10 / 13 / 2010  Amount of Each Disbursement this Period 875.44  Category/Type 003
B.	Full Name (Last, First, Middle Initial) Mr. Dickie Brennan  Mailing Address 605 CANAL ST  City NEW ORLEANS State LA Zip Code 70130  Purpose of Disbursement Inkind: In-Kind Fundraising Costs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-I-20823 Date of Disbursement 10 / 13 / 2010  Amount of Each Disbursement this Period 2338.60  Category/Type
C.	Full Name (Last, First, Middle Initial) Steven Pettus  Mailing Address 605 Canal Street  City New Orleans State LA Zip Code 70130-2307  Purpose of Disbursement Inkind: In-Kind Fundraising Cost Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B-I-20822 Date of Disbursement 10 / 13 / 2010  Amount of Each Disbursement this Period 2338.60  Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>5552.64</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>176115.59</b>



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.	Full Name (Last, First, Middle Initial) Carolyn Chouest <hr/> Mailing Address 16055 E Main Street <hr/> City State Zip Code Cut Off LA 70345-3800 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name	Transaction ID: B-E-20910 Date of Disbursement 10 / 13 / 2010 <hr/> Amount of Each Disbursement this Period 600.00 <hr/> 010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 2010
B.	Full Name (Last, First, Middle Initial) Casey Chouest <hr/> Mailing Address PO Box 310 <hr/> City State Zip Code Galliano LA 70354-0310 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name	Transaction ID: B-E-20912 Date of Disbursement 10 / 13 / 2010 <hr/> Amount of Each Disbursement this Period 600.00 <hr/> 010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 2010
C.	Full Name (Last, First, Middle Initial) Gary Chouest <hr/> Mailing Address PO Box 310 <hr/> City State Zip Code Galliano LA 70354-0310 <hr/> Purpose of Disbursement Refund of Contribution Candidate Name	Transaction ID: B-E-20911 Date of Disbursement 10 / 13 / 2010 <hr/> Amount of Each Disbursement this Period 600.00 <hr/> 010 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff 2010

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

1800.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

A.

Full Name (Last, First, Middle Initial)  
Ross Chouest

Mailing Address 16055 E Main Street

City State Zip Code  
Cut Off LA 70345-3800

Purpose of Disbursement  
Refund of Contribution

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Runoff 2010

Transaction ID: B-E-20913

Date of Disbursement

10 / 13 / 2010

Amount of Each Disbursement this Period

600.00

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

600.00

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

2400.00

# SCHEDULE C (FEC Form 3)

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

## LOANS

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

NAME OF COMMITTEE (In Full)  
Joseph Cao for Congress

Transaction ID: SC/10-L5

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Mr. Bryan Wagner

Election:  
 Primary  
 General  
 Other (specify) ▼  
G2008

Mailing Address 600 CARONDELET  
SUITE 600

City NEW ORLEANS State LA ZIP Code 70130

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

### TERMS

Date Incurred: M M 10 D D 01 Y Y Y Y 2008  
 Date Due: None  
 Interest Rate: 0 % (apr)  
 Secured:  Yes  No

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

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

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	1000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	[ ]

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

**SCHEDULE C (FEC Form 3)**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 76 / 76
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

**LOANS**

NAME OF COMMITTEE (In Full)  
 Joseph Cao for Congress

**Transaction ID: SC/10-L6**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Judy Wagner	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ G2008
Mailing Address 625 ST. CHARLES AVE #6C	
City NEW ORLEANS State LA ZIP Code 70130	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

**TERMS**

Date Incurred M M 1 0 D D 0 1 Y Y Y Y 2 0 0 8	Date Due None	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

<b>SUBTOTALS</b> This Period This Page (optional) .....	2000.00
<b>TOTALS</b> This Period (last page in this line only) .....	3000.00

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