

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Charles Boustany Jr. MD for Congress, Inc.

ADDRESS (number and street) ▼

PO Box 80126

Check if different than previously reported. (ACC)

Lafayette

LA

70598-0126

2. **FEC IDENTIFICATION NUMBER** ▼

C C00394866

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

LA

03

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 08 / 22 / 2014 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

07 / 01 / 2014 through 08 / 02 / 2014

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 Alan Hebert

Signature of Treasurer Alan Hebert

[Electronically Filed]

Date

08 / 08 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Charles Boustany Jr. MD for Congress, Inc.**

Report Covering the Period: From:  /  /  To:  /  /

	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))....	124786	1776838.82
(b) Total Contribution Refunds (from Line 20(d)) .....	0	1600
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	124786	1775238.82
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	132967.52	1107408.96
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	6013.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	132967.52	1101395.6
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	802153.6	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0	

**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

**Charles Boustany Jr. MD for Congress, Inc.**

Report Covering the Period: From:  /  /  To:  /  /

<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		
(i) Itemized (use Schedule A).....	35150	720595.89
(ii) Unitemized.....	5136	53502.52
(iii) TOTAL of contributions from individuals ▶	40286	774098.41
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	84500	1002740.41
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	124786	1776838.82
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0	0
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0	6013.36
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	93.1	2843.51
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	124879.1	1785695.69

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	132967.52	1107408.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	1600
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	1600
21. OTHER DISBURSEMENTS .....	103000	109050
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	235967.52	1218058.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	913242.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	124879.1
25. SUBTOTAL (add Line 23 and Line 24).....	1038121.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	235967.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	802153.6

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas J. Callender**

Mailing Address **PO Box 242**

City **Perry** State **LA** Zip Code **70575-0242**

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

Name of Employer **Retired** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 01 / 2014**

**Transaction ID : A-CF26054**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Institute for Neuropsychiatry, APMC**

Mailing Address **2829 4th Avenue**

City **Lake Charles** State **LA** Zip Code **70601**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : A-CF26086**

Amount of Each Receipt this Period  
**2600**

SEE MEMO ITEM/Verified Non-Corporate

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

**C.** Full Name (Last, First, Middle Initial)  
**D. Dale Archer Jr.**

Mailing Address **2829 4th Avenue  
Suite 150**

City **Lake Charles** State **LA** Zip Code **70601-7897**

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

Name of Employer **Inst. for Neuropsychiatrics** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : A-PIP462**

Amount of Each Receipt this Period  
**2600**

SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

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

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

**2850.00**

**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 6 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**D&M Barge Rentals, LLC**

Mailing Address PO Box 2545

City State Zip Code  
Morgan City LA 70381-2545

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26102**

Amount of Each Receipt this Period  
**500**  
 SEE MEMO ITEM/Verified Non-Corporate

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

**B.** Full Name (Last, First, Middle Initial)  
**David M. Patterson**

Mailing Address PO Box 5

City State Zip Code  
Berwick LA 70342

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

Name of Employer Occupation  
Central Boat Rentals Chief Financial Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-PIP465**

Amount of Each Receipt this Period  
**500**  
 SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

**C.** Full Name (Last, First, Middle Initial)  
**Women's Clinic**

Mailing Address 2602 North Street

City State Zip Code  
Abbeville LA 70510

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26125**

Amount of Each Receipt this Period  
**250**  
 SEE MEMO ITEM/Verified Non-Corporate

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

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

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

**750.00**

**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 7 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Trent J. Fogleman**

Mailing Address 3601 Kaliste Saloom Road  
Unit 701

City Lafayette State LA Zip Code 70508-7635

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

Name of Employer Abbeville General Hospital Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : A-PIP461**

Amount of Each Receipt this Period  
**250**

SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

**B.** Full Name (Last, First, Middle Initial)  
**B. Eugene Berry**

Mailing Address 2717 East Lakeshore Drive

City Baton Rouge State LA Zip Code 70808-2151

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

Name of Employer Cut Surgical Center Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : A-CF26098**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Robert S. Hendrick Jr.**

Mailing Address 3366 Deborah Drive

City Monroe State LA Zip Code 71201-2151

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

Name of Employer Anesthesia Assoc. of Monroe Occupation Anesthesiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : A-CF26100**

Amount of Each Receipt this Period  
**100**

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

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

**350.00**

**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 8 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Brian Jones**

Mailing Address 1427 Watkins Street

City State Zip Code  
Lake Charles LA 70601

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

Name of Employer Occupation  
Brian R. Jones CPA, LLC Certified Public Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**475**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26124**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**James V. King Sr.**

Mailing Address 111 Devin Lane

City State Zip Code  
Lafayette LA 70508-6857

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

Name of Employer Occupation  
Rig Tools, Inc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26091**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Richard L. Miller**

Mailing Address PO Box 845  
921 Cayret Street

City State Zip Code  
Scott LA 70583-0845

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26116**

Amount of Each Receipt this Period  
**500**

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

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

**700.00**



**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 9 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip E. Noel**

Mailing Address 538 Beaulieu Drive

City State Zip Code  
Lafayette LA 70508-6722

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 11 2014**

**Transaction ID : A-CF26108**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Michael J. Remondet Jr.**

Mailing Address 200 West Congress Street  
Suite 1100

City State Zip Code  
Lafayette LA 70501-6870

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

Name of Employer Occupation  
Jeansonne & Remondet Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 11 2014**

**Transaction ID : A-CF26085**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**William W. Rucks III**

Mailing Address PO Box 51524

City State Zip Code  
Lafayette LA 70505-1524

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

Name of Employer Occupation  
Rucks Oil Properties Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 11 2014**

**Transaction ID : A-CF26111**

Amount of Each Receipt this Period  
**100**

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

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

**2350.00**

**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 10 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**John C. Shank**

Mailing Address 4116 Woodside Drive

City State Zip Code  
Lake Charles LA 70605-4034

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26114**

Amount of Each Receipt this Period  
**100**

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

Mailing Address 215 Cemetery Road

City State Zip Code  
Saint Martinville LA 70582-8114

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

Name of Employer Occupation  
St. Mary Sugar Cooperative General Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26088**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Victor A. Toce**

Mailing Address 105 Bluff Lane

City State Zip Code  
Lafayette LA 70508

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

Name of Employer Occupation  
Toce Oil Company, Inc. Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 11 / 2014**

**Transaction ID : A-CF26113**

Amount of Each Receipt this Period  
**500**

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

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

**1100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Robert S. Taylor**

Mailing Address 6780 Burden Lane

City Baton Rouge State LA Zip Code 70808-4211

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 14 / 2014**

**Transaction ID : A-CF26081**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen G. Abshire**

Mailing Address PO Box 80277

City Lafayette State LA Zip Code 70598-0277

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

**Transaction ID : A-CF26133**

Amount of Each Receipt this Period  
**250**

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

Mailing Address 514 N Avenue H

City Crowley State LA Zip Code 70526-4447

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 18 / 2014**

**Transaction ID : A-CF26129**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

**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 12 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Jude M. Comeaux**

Mailing Address 6891 Enis Road

City Maurice State LA Zip Code 70555

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

Name of Employer T. Baker Smith, Inc. Occupation Energy Service Provider

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26144**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Suzan S. Croughan**

Mailing Address 358 Croughan Lane

City Crowley State LA Zip Code 70526-3159

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

Name of Employer Retired Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26128**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Douglas Gehrig**

Mailing Address 3414 Common Street

City Lake Charles State LA Zip Code 70607-1729

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

Name of Employer McDonald's of SW Louisiana Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26135**

Amount of Each Receipt this Period  
**100**

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

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

**850.00**

**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 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michael F. Mosing**

Mailing Address 115 Wembley Road

City Lafayette State LA Zip Code 70503-3568

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

Name of Employer Frank's Casing Crow Occupation Corporate Pilot

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26136**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Earl J. Rozas**

Mailing Address 11 Colony Road

City Gretna State LA Zip Code 70056-7001

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

Name of Employer Retired Occupation Physician- Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26141**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Richard G. Zepernick Jr.**

Mailing Address 420 Biltmore Way

City Lafayette State LA Zip Code 70508-6773

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

Name of Employer Marlin Energy, LLC Occupation President/ Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26126**

Amount of Each Receipt this Period  
**1000**

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

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

**1600.00**

**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 14 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Sheila M. Zepernick**

Mailing Address 420 Biltmore Way

City State Zip Code  
Lafayette LA 70508-6773

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF26127**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**James Kassouf**

Mailing Address 1370 W 6th Street  
Suite 206

City State Zip Code  
Cleveland OH 44113-1315

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
International Mgmt. Systems Real Estate Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF26115**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Daryl J. Doise**

Mailing Address 125 E Lake Drive

City State Zip Code  
Sunset LA 70584-5752

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Central Control, LLC Health Care Operations and Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-CF26155**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Hunton & Williams**

Mailing Address 1900 K Street NW

City Washington State DC Zip Code 20006-1110

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26175**

Amount of Each Receipt this Period  
 1000

No Partner Reaches Itemization/Verified Non-Corporate

**B.** Full Name (Last, First, Middle Initial)  
**John McManus**

Mailing Address 2082 Grace Manor Court

City McLean State VA Zip Code 22101-4900

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

Name of Employer Occupation  
 The McManus Group President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26159**

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**R. Jeffrey Newcorn**

Mailing Address 849 North Franklin Street  
 Unit 607

City Chicago State IL Zip Code 60610

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

Name of Employer Occupation  
 The Carmen Group Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26166**

Amount of Each Receipt this Period  
 1000

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

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

3000.00

**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 16 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mahtook & Lafleur, LLC.**

Mailing Address 600 Jefferson Street  
Suite 1000

City Lafayette State LA Zip Code 70501-6953

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26211**

Amount of Each Receipt this Period  
2000  
SEE MEMO ITEM/Verified Non-Corporate

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

**B.** Full Name (Last, First, Middle Initial)  
**Robert A. Mahtook Jr.**

Mailing Address PO Box 3089

City Lafayette State LA Zip Code 70502

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

Name of Employer Occupation  
Mahtook & LaFleur Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-PIP464**

Amount of Each Receipt this Period  
2000  
SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

**C.** Full Name (Last, First, Middle Initial)  
**S. Andre Aucoin**

Mailing Address PO Box 1126

City Eunice State LA Zip Code 70535-1126

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

Name of Employer Occupation  
Acadian Engineering and Env. Cons. Owner/President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26201**

Amount of Each Receipt this Period  
250

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

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

2250.00



**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 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth G. Goss**

Mailing Address 247 East Hoyt Avenue

City State Zip Code  
Crowley LA 70526-6705

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26203**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Jeffrey Kimbell**

Mailing Address 601 13th Street NW  
Suite 650 North

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
Jeffrey J. Kimbell & Assoc. Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26192**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Leonder B. Labbe**

Mailing Address 211 Lakeside Drive

City State Zip Code  
Lafayette LA 70508-7045

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26205**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**

**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 18 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Louizette B. Labbe**

Mailing Address 211 Lakeside Drive

City Lafayette State LA Zip Code 70508-7045

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26206**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth C. Lafleur**

Mailing Address 1108 Katherine Drive

City Opelousas State LA Zip Code 70570-8306

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26213**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Patti C. Lawrence**

Mailing Address PO Box L  
219 E Second Street

City Crowley State LA Zip Code 70527-6012

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : A-CF26200**

Amount of Each Receipt this Period  
**125**

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

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

**625.00**

**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 19 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Percy L. Lawrence**

Mailing Address PO Box L  
219 E Second Street

City State Zip Code  
Crowley LA 70527-6012

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26199**

Amount of Each Receipt this Period  
**125**

**B.** Full Name (Last, First, Middle Initial)  
**Jan Mickey**

Mailing Address 112 Whitcomb Road

City State Zip Code  
Lafayette LA 70503-3624

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26208**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**John J. Mickey**

Mailing Address 112 Whitcomb Road

City State Zip Code  
Lafayette LA 70503-3624

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26209**

Amount of Each Receipt this Period  
**500**

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

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

**1125.00**

**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 20 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David Reinauer**

Mailing Address PO Box 3755  
409 Iris Street

City Lake Charles State LA Zip Code 70602-3755

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

Name of Employer Self Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26214**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Ruth B. Saloom**

Mailing Address 1206 West Bayou Parkway

City Lafayette State LA Zip Code 70503-3618

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26204**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**John F. Craton**

Mailing Address 727 East 15th Street

City Crowley State LA Zip Code 70526-2507

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

Name of Employer Barousse & Craton Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**07 / 30 / 2014**

**Transaction ID : A-CF26193**

Amount of Each Receipt this Period  
**500**

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

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

**850.00**

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

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

FOR LINE NUMBER: PAGE 21 OF 101  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Joe Anzalone Jr.**

Mailing Address PO Box 1617

City State Zip Code  
Broussard LA 70518-1617

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

Name of Employer Occupation  
Anzalone Real Estate Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26276**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**George L. Billeaud III**

Mailing Address 1105 S College Road  
Suite C

City State Zip Code  
Lafayette LA 70503-3067

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

Name of Employer Occupation  
Self-Employed Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26279**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Barry A. Bohn**

Mailing Address 111 Canterbury Road

City State Zip Code  
Lafayette LA 70503-3639

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26252**

Amount of Each Receipt this Period  
**250**

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

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

**850.00**

**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 22 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Claire V. Bohn</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 111 Canterbury Road		<b>Transaction ID : A-CF26253</b>	
City Lafayette	State LA	Zip Code 70503-3639	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350		

Full Name (Last, First, Middle Initial) <b>B. Angell F. Boustany</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 200 Oakwater Drive		<b>Transaction ID : A-CF26254</b>	
City Lafayette	State LA	Zip Code 70503-2230	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700		

Full Name (Last, First, Middle Initial) <b>C. Walteen Broussard</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2014	
Mailing Address 7899 Highway 87		<b>Transaction ID : A-CF26226</b>	
City Jeanerette	State LA	Zip Code 70544-8200	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50	
Name of Employer Self-Employed	Occupation Farmer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	400.00

**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 23 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**James A. Chance**

Mailing Address 730 East Kaliste Saloom Road

City State Zip Code  
Lafayette LA 70508-2547

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

Name of Employer Occupation  
C&C Technologies, Inc. Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26249**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Danielle Cromwell**

Mailing Address 138 Pembroke Lane

City State Zip Code  
Lafayette LA 70508-5614

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

Name of Employer Occupation  
Acadian Computer Systems Attorney/ General Counsel

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26256**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Tyson A. Cromwell**

Mailing Address 138 Pembroke Lane

City State Zip Code  
Lafayette LA 70508-5614

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

Name of Employer Occupation  
Northwestern Mutual Wealth Management Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26255**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

**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 24 OF 101	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Charlotte B. Cryer**

Mailing Address 113 Emily Circle

City Lafayette State LA Zip Code 70508

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

Name of Employer Self-Employed Occupation Retailer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26245**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Russell A. Cryer**

Mailing Address 113 Emily Circle

City Lafayette State LA Zip Code 70508

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

Name of Employer Acadian Companies Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26244**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Isabella L. Delahoussaye**

Mailing Address 705 East 3rd Street

City Crowley State LA Zip Code 70526-5225

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26237**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**



**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 25 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Grover L. Dunphy**

Mailing Address **PO Box 3704**

City **Lafayette** State **LA** Zip Code **70502-3704**

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

Name of Employer **Acadiana Rubber & Gasket** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26240**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Leslie Dunphy**

Mailing Address **PO Box 3704**

City **Lafayette** State **LA** Zip Code **70502-3704**

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

Name of Employer **Information Requested** Occupation **Information Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26241**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Bernard C. Fruge Jr.**

Mailing Address **313 Worth Avenue**

City **Lafayette** State **LA** Zip Code **70508-6636**

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

Name of Employer **Self-Employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26246**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

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

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

FOR LINE NUMBER: PAGE 26 OF 101  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Cindy Fruge**

Mailing Address 313 Worth Avenue

City Lafayette State LA Zip Code 70508

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

Name of Employer Homeaker Occupation Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26247**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Charles A. Fuselier**

Mailing Address 7031 Main Highway

City Saint Martinville State LA Zip Code 70582-7202

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26223**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Elizabeth Harrington**

Mailing Address PO Box 1006

City Crowley State LA Zip Code 70527-1006

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26234**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

**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 27 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Linda A. Helo**

Mailing Address **PO Box 728**

City **Crowley** State **LA** Zip Code **70527-0728**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26239**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Sylvia Johnson**

Mailing Address **606 North Eastern Avenue**

City **Crowley** State **LA** Zip Code **70526-4518**

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

Name of Employer **Self-Employed** Occupation **Florist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26238**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Elisabeth C. Kraft**

Mailing Address **109 Nickerson Parkway**

City **Lafayette** State **LA** Zip Code **70501-6509**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26242**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

**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 28 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Ralph E. Kraft**

Mailing Address 109 Nickerson Parkway

City State Zip Code  
Lafayette LA 70501-6509

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26243**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Edward R. Lamb**

Mailing Address 226 Princeton Woods Loop

City State Zip Code  
Lafayette LA 70508-6600

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

Name of Employer Occupation  
Lamb Services, Inc. Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26277**

Amount of Each Receipt this Period  
**500**

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

Mailing Address 124 Heartwood Circle

City State Zip Code  
Lafayette LA 70503-2200

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

Name of Employer Occupation  
Cornerstone Financial Group Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 31 2014**

**Transaction ID : A-CF26258**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

**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 29 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Lawrence F. Svendson**

Mailing Address 202 Whitcomb Road

City State Zip Code  
Lafayette LA 70503-3626

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

Name of Employer Occupation  
Marlin Energy Petroleum Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2100**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26259**

Amount of Each Receipt this Period  
**1500**

**B.** Full Name (Last, First, Middle Initial)  
**Fred C. Webre**

Mailing Address 615 Camellia Drive

City State Zip Code  
Lafayette LA 70503-4703

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26248**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Sue S. Brignac**

Mailing Address 100 Hummingbird Lane

City State Zip Code  
Sunset LA 70584-5404

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

Name of Employer Occupation  
Washington State Bank President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-CF26288**

Amount of Each Receipt this Period  
**500**

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

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

**2250.00**

**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 30 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**David L. Callecod**

Mailing Address 213 Biltmore Way

City State Zip Code  
Lafayette LA 70508-7096

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

Name of Employer Occupation  
Lafayette General Medical President & Chief Executive Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 01 2014**

**Transaction ID : A-CF26303**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Kim Callecod**

Mailing Address 213 Biltmore Way

City State Zip Code  
Lafayette LA 70508-7096

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 01 2014**

**Transaction ID : A-CF26304**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph W. Freeland**

Mailing Address PO Box 247

City State Zip Code  
Crowley LA 70527-0247

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

Name of Employer Occupation  
Self-Employed Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 01 2014**

**Transaction ID : A-CF26292**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

**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 31 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Michael S. Haydel**

Mailing Address 231 Princeton Woods Loop

City Lafayette State LA Zip Code 70508

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-CF26289**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Allison Leblanc**

Mailing Address 415 Copperfield Way

City Youngsville State LA Zip Code 70592

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-CF26306**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Blair P. LeBlanc**

Mailing Address 415 Copperfield Way

City Youngsville State LA Zip Code 70592-5417

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

Name of Employer Stokes and Spiehler Occupation Petroleum Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-CF26305**

Amount of Each Receipt this Period  
**250**

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

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

**1000.00**

**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 32 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Mildred R. McElligott**

Mailing Address 127 Shannon Road

City State Zip Code  
Lafayette LA 70503-3510

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

Name of Employer Occupation  
Macro Oil Company President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 01 / 2014**

**Transaction ID : A-CF26290**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Chennault Two Ten Properties**

Mailing Address 100 Avenue J

City State Zip Code  
Lake Charles LA 70615-5056

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : A-CF26298**

Amount of Each Receipt this Period  
**1000**

SEE MEMO ITEM/Verified Non-Corporate

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

**C.** Full Name (Last, First, Middle Initial)  
**A.T. Leonards**

Mailing Address 100 Avenue J

City State Zip Code  
Lake Charles LA 70615

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

Name of Employer Occupation  
Chennault Two Ten Properties Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : A-PIP468**

Amount of Each Receipt this Period  
**1000**

SEE MEMO ITEM/Verified Non-Corporate

**[MEMO ITEM]**  
Partnership Itemization Memo

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

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

**1250.00**



**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 33 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**H. J. Andre Comeaux Jr.**

Mailing Address 506 Roselawn Boulevard

City Lafayette State LA Zip Code 70503-4012

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 02 / 2014**

**Transaction ID : A-CF26291**

Amount of Each Receipt this Period  
**500**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**500.00**

**35150.00**

**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 34 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Alticor Political Action Committee**

Mailing Address 7575 Fulton Street East

City State Zip Code  
Ada MI 49355

FEC ID number of contributing federal political committee. **C C00034884**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : A-CF26066**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**American Apparel & Footwear Association PAC**

Mailing Address 1601 North Kent Street  
Suite 1200

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00338442**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : A-CF26065**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**American Council of Life Insurers Political Action Committee**

Mailing Address 101 Constitution Avenue NW  
Suite 700

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 02 / 2014

**Transaction ID : A-CF26067**

Amount of Each Receipt this Period  
1000

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

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

3000.00

**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 35 OF 101
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Deloitte Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 02 / 2014**

**Transaction ID : A-CF26064**

Amount of Each Receipt this Period  
**1000**

**B. Medtronic, Inc. Medical Technology Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 950 F Street NW Suite 500

City Washington State DC Zip Code 20004-1478

FEC ID number of contributing federal political committee. **C C00311878**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 03 / 2014**

**Transaction ID : A-CF26087**

Amount of Each Receipt this Period  
**1000**

**C. American Bankers Association (BANKPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1120 Connecticut Avenue NW Suite 600

City Washington State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8500**

Date of Receipt  
M M / D D / Y Y Y Y  
**07 / 18 / 2014**

**Transaction ID : A-CF26132**

Amount of Each Receipt this Period  
**2500**

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

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

**4500.00**

**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 36 OF 101	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. American College of Surgeons Professionals Association PAC (ACSPA PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 F Street NW  
 Suite 1000  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C C00382424**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **7500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014  
**Transaction ID : A-CF26131**  
 Amount of Each Receipt this Period  
 2500

**B. Atmos Energy Corporation PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5430 Lyndon B. Johnson Freeway  
 Suite 160  
 City Dallas State TX Zip Code 75240-2630  
 FEC ID number of contributing federal political committee. **C C00381954**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014  
**Transaction ID : A-CF26130**  
 Amount of Each Receipt this Period  
 2500

**C. BP Corporation North America, Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 Westlake Park Boulevard  
 City Houston State TX Zip Code 77079  
 FEC ID number of contributing federal political committee. **C C00060103**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **6000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014  
**Transaction ID : A-CF26146**  
 Amount of Each Receipt this Period  
 1000

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

6000.00

**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 37 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**BP Corporation North America, Inc. PAC**

Mailing Address 501 Westlake Park Boulevard

City Houston State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : A-CF26187**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**American Association of Oral & Maxillofacial Surgery Political Action Committee**

Mailing Address 9700 Bryn Mawr Avenue

City Rosemont State IL Zip Code 60018-5701

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26184**

Amount of Each Receipt this Period  
 3000

**C.** Full Name (Last, First, Middle Initial)  
**American Institute of Certified Public Accountants PAC (AICPA PAC)**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26176**

Amount of Each Receipt this Period  
 2500

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

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

6500.00

**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 38 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**American Occupational Therapy Association Political Action Committee (AOTPAC)**

Mailing Address 4720 Montgomery Lane

City State Zip Code  
Bethesda MD 20814-5320

FEC ID number of contributing federal political committee. **C C00089086**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26186**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**American Society of Pension Professionals & Actuaries PAC (ASPPA PAC)**

Mailing Address 4245 North Fairfax Drive  
Suite 750

City State Zip Code  
Arlington VA 22203-1620

FEC ID number of contributing federal political committee. **C C00333104**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26182**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Bechtel Group, Inc. Political Action Committee**

Mailing Address 50 Beale Street

City State Zip Code  
San Francisco CA 94105-1813

FEC ID number of contributing federal political committee. **C C00103697**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26177**

Amount of Each Receipt this Period  
2500

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

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

6000.00

**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 39 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Chicago Bridge & Iron Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1050 K Street NW  
 Suite 620  
 City Washington State DC Zip Code 20001-4456  
 FEC ID number of contributing federal political committee. **C C00104885**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014  
**Transaction ID : A-CF26174**  
 Amount of Each Receipt this Period  
 1000

**B. Cigna Corporation Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 Waterfront Street  
 Suite 500  
 City Oxon Hill State MD Zip Code 20745-1161  
 FEC ID number of contributing federal political committee. **C C00085316**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014  
**Transaction ID : A-CF26163**  
 Amount of Each Receipt this Period  
 2500

**C. Cisco Systems E-PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 Park Road  
 Suite E  
 City Burlingame State CA Zip Code 94010  
 FEC ID number of contributing federal political committee. **C C00362707**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014  
**Transaction ID : A-CF26161**  
 Amount of Each Receipt this Period  
 2500

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

6000.00

**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 40 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**Cox Enterprises PAC (COXPAC) Inc.**

Mailing Address 975 F Street NW  
Suite 300

City Washington State DC Zip Code 20004-1459

FEC ID number of contributing federal political committee. **C C00477653**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26181**

Amount of Each Receipt this Period  
2500

**B. Full Name (Last, First, Middle Initial)**  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Avenue NW  
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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26183**

Amount of Each Receipt this Period  
1000

**C. Full Name (Last, First, Middle Initial)**  
**ESOP Association PAC**

Mailing Address 1726 M Street NW  
Suite 501

City Washington State DC Zip Code 20036-4522

FEC ID number of contributing federal political committee. **C C00196089**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26173**

Amount of Each Receipt this Period  
1000

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

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

4500.00



**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 41 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Federation of American Hospitals PAC (FedPAC)**

Mailing Address 801 Pennsylvania Avenue NW  
Suite 245

City Washington State DC Zip Code 20004-2697

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26179**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**Ikaria Political Action Committee**

Mailing Address 444 North Capitol Street NW  
Suite 830

City Washington State DC Zip Code 20001-1569

FEC ID number of contributing federal political committee. **C** C00463539

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26185**

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Independent Community Bankers PAC**

Mailing Address 1 Thomas Circle NW  
Suite 400

City Washington State DC Zip Code 20005-5807

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26178**

Amount of Each Receipt this Period  
1000

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

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

4500.00

**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 42 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Investment Company Institute PAC (ICI PAC)</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1401 H Street NW Suite 1200		<b>Transaction ID : A-CF26167</b>
City Washington State DC Zip Code 20005-2110	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C C00105981</b>	Name of Employer Occupation	Amount of Each Receipt this Period 8500
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8500	

Full Name (Last, First, Middle Initial) <b>B. IPAA Wildcatters PAC Fund</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1201 15th Street NW Suite 300		<b>Transaction ID : A-CF26171</b>
City Washington State DC Zip Code 20005-2842	Amount of Each Receipt this Period 1500	
FEC ID number of contributing federal political committee. <b>C C00246306</b>	Name of Employer Occupation	Amount of Each Receipt this Period 3500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500	

Full Name (Last, First, Middle Initial) <b>C. K&amp;L Gates, LLP Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1601 K Street NW Suite 500		<b>Transaction ID : A-CF26180</b>
City Washington State DC Zip Code 20006-1682	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C C00213173</b>	Name of Employer Occupation	Amount of Each Receipt this Period 2500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	3500.00

**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 43 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**Marathon Oil Company Employees Political Action Committee (MEPAC)**

Mailing Address 539 South Main Street  
Room 2635

City Findlay State OH Zip Code 45840-3229

FEC ID number of contributing federal political committee. **C** C00040568

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26170**

Amount of Each Receipt this Period  
 2000

**B. Full Name (Last, First, Middle Initial)**  
**National Customs Brokers and Forwarders Association of America PAC (NCBFAA PAC)**

Mailing Address 1200 18th Street NW  
Suite 901

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00207969

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26162**

Amount of Each Receipt this Period  
 1000

**C. Full Name (Last, First, Middle Initial)**  
**National Ocean Industries Association PAC**

Mailing Address 1120 G Street NW  
Suite 900

City Washington State DC Zip Code 20005-3801

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26169**

Amount of Each Receipt this Period  
 1000

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

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

4000.00

**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 44 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Principal Life Insurance Company PAC (PRINPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 711 High Street

City Des Moines State IA Zip Code 50392-0001

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26172**

Amount of Each Receipt this Period  
 2000

**B. Shell Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 2463

City Houston State TX Zip Code 77252-2463

FEC ID number of contributing federal political committee. **C** C00039503

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26168**

Amount of Each Receipt this Period  
 1000

**C. St. Jude Medical, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Lillehei Plaza

City Saint Paul State MN Zip Code 55117-1761

FEC ID number of contributing federal political committee. **C** C00305029

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 23 / 2014

**Transaction ID : A-CF26165**

Amount of Each Receipt this Period  
 2000

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

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

5000.00

**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 45 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**The Goldman Sachs Group, Inc. Political Action Committee**

Mailing Address 101 Constitution Avenue NW  
Suite 1000 E

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00350744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 23 / 2014**

**Transaction ID : A-CF26164**

Amount of Each Receipt this Period  
**2000**

**B. Full Name (Last, First, Middle Initial)**  
**American Physical Therapy Association PAC (PT PAC)**

Mailing Address 1111 North Fairfax Street

City Alexandria State VA Zip Code 22314-1484

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26217**

Amount of Each Receipt this Period  
**2000**

**C. Full Name (Last, First, Middle Initial)**  
**American Physical Therapy Association PAC (PT PAC)**

Mailing Address 1111 North Fairfax Street

City Alexandria State VA Zip Code 22314-1484

FEC ID number of contributing federal political committee. **C C00012880**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26218**

Amount of Each Receipt this Period  
**500**

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

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

**4500.00**

**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 46 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Conrad T. Comeaux Campaign Account**

Mailing Address PO Box 52207

City Lafayette State LA Zip Code 70505

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26210**

Amount of Each Receipt this Period  
**500**  
 FEDERALLY PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**United Parcel Service, Inc. Political Action Committee (UPS PAC)**

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **9000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : A-CF26219**

Amount of Each Receipt this Period  
**4500**

**C.** Full Name (Last, First, Middle Initial)  
**American Petroleum Institute Political Action Committee (API PAC)**

Mailing Address 1220 L Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00483677**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26262**

Amount of Each Receipt this Period  
**1000**

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

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

**6000.00**

**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 47 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**CME Group, Inc. PAC (CME/CBOT/NYMEX PAC)**

Mailing Address 20 South Wacker Drive

City Chicago State IL Zip Code 60606-7431

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26264**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**FMR, LLC Federal PAC (Fidelity PAC)**

Mailing Address 82 Devonshire Street

City Boston State MA Zip Code 02109

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26261**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Kelley Drye & Warren PAC**

Mailing Address 3050 K Street NW Suite 400

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C C00301929**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26266**

Amount of Each Receipt this Period  
**1000**

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

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

**5500.00**

**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 48 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Laboratory Corporation Of America Holdings Political Participation Committee**

Mailing Address 231 Maple Avenue

City Burlington State NC Zip Code 27215-5848

FEC ID number of contributing federal political committee. **C** C00314997

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26268**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**Massachusetts Mutual Life Insurance Company Political Action Committee (MMPAC)**

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26270**

Amount of Each Receipt this Period  
 7000

**C.** Full Name (Last, First, Middle Initial)  
**Northwestern Mutual Life Insurance Company Federal PAC**

Mailing Address 720 East Wisconsin Avenue

City Milwaukee State WI Zip Code 53202-4703

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-CF26269**

Amount of Each Receipt this Period  
 5000

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

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

9000.00



**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 49 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A. Full Name (Last, First, Middle Initial)**  
**Occidental Petroleum Corporation Political Action Committee (OXY PAC)**

Mailing Address 10889 Wilshire Boulevard

City Los Angeles State CA Zip Code 90024-4201

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26263**

Amount of Each Receipt this Period  
**1500**

**B. Full Name (Last, First, Middle Initial)**  
**Wal-Mart Stores, Inc. PAC for Responsible Government (Wal\*PAC)**

Mailing Address 702 8th Street SW

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26265**

Amount of Each Receipt this Period  
**1000**

**C. Full Name (Last, First, Middle Initial)**  
**Winston & Strawn LLP Political Action Committee**

Mailing Address 1700 K Street NW

City Washington State DC Zip Code 20006-3817

FEC ID number of contributing federal political committee. **C C00282921**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 31 / 2014**

**Transaction ID : A-CF26267**

Amount of Each Receipt this Period  
**1000**

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

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

**3500.00**

**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 50 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Dealers Election Action Committee of the National Automotive Dealers Association**

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A-CF26296**

Amount of Each Receipt this Period  
 1500

**B.** Full Name (Last, First, Middle Initial)  
**National Stone, Sand & Gravel Association (NSSGA ROCKPAC)**

Mailing Address 1605 King Street

City Alexandria State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A-CF26297**

Amount of Each Receipt this Period  
 1000

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

84500.00

**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 51 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

**A.** Full Name (Last, First, Middle Initial)  
**Presidential Bank**

Mailing Address 4520 East-West Highway

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.97

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : A-MF26272**

Amount of Each Receipt this Period  
50.05

Interest Income

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

50.05

50.05

**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 52 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cox Communications</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address PO Box 60001		Amount of Each Disbursement this Period 104.99
City New Orleans	State LA	
Zip Code 70160	Purpose of Disbursement Telephone Service	<b>Transaction ID : B-E-26010</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Party Central, Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 408 Maurice Street		Amount of Each Disbursement this Period 43.15
City Lafayette	State LA	
Zip Code 70506-5620	Purpose of Disbursement Gifts & Mementos	<b>Transaction ID : B-E-26011</b>
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Laura Ann D. Edwards</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 124 Acacia Drive		Amount of Each Disbursement this Period 189.14
City Lafayette	State LA	
Zip Code 70508-4002	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-26009</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	337.28
<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)	PAGE 53 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address Postmaster		Amount of Each Disbursement this Period 2500.00
City Lafayette	State LA	
Zip Code 70505		Transaction ID : B-S-3725
Purpose of Disbursement Postage	Category/ Type 001	
Candidate Name		[MEMO ITEM] Subitemization of Laura Ann Edwards(07/02/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Robin Prejean</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1610 Laurie Street		Amount of Each Disbursement this Period 60
City Rayne	State LA	
Zip Code 70578		Transaction ID : B-S-3721
Purpose of Disbursement Cleaning Services	Category/ Type 001	
Candidate Name		[MEMO ITEM] Subitemization of Laura Ann Edwards(07/02/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BDPC, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 110 Bellaire Drive		Amount of Each Disbursement this Period 2500
City New Orleans	State LA	
Zip Code 70124		Transaction ID : B-E-26060
Purpose of Disbursement Web Hosting Fee	Category/ Type 001	
Candidate Name		[MEMO ITEM] Subitemization of Laura Ann Edwards(07/02/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<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)		PAGE 54 OF 101	
	<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

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)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Total HR Solutions LLC</b>			Date of Disbursement MM / DD / YYYY 07 / 07 / 2014	
Mailing Address 935 Camellia Boulevard Suite 200			Amount of Each Disbursement this Period 9,999.99 1702.99	
City Lafayette	State LA	Zip Code 70508	Transaction ID : B-E-26156	
Purpose of Disbursement Payroll Taxes		Category/Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. The Levatino Group</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2014	
Mailing Address 20 F Street NW Suite 500			Amount of Each Disbursement this Period 9,999.99 89089.23	
City Washington	State DC	Zip Code 20001	Transaction ID : B-E-26062	
Purpose of Disbursement SEE MEMO ITEMS		Category/Type 003	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. The Levatino Group</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2014	
Mailing Address 20 F Street NW Suite 500			Amount of Each Disbursement this Period 9,999.99 47489	
City Washington	State DC	Zip Code 20001	Transaction ID : B-S-3746	
Purpose of Disbursement Fundraising Consulting		Category/Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	90792.22
<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)	PAGE 55 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Concord Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Stewart Street Suite 1000		Amount of Each Disbursement this Period 65
City Seattle State WA Zip Code 98101-2411	Purpose of Disbursement Blast E-Mail Service	
Candidate Name	Category/Type 001	<b>Transaction ID : B-S-3753</b>  <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 116.3
City Dallas State TX Zip Code 75266-0481	Purpose of Disbursement Express Shipping	
Candidate Name	Category/Type 001	<b>Transaction ID : B-S-3728</b>  <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.65
City Dallas State TX Zip Code 75266-0481	Purpose of Disbursement Express Shipping	
Candidate Name	Category/Type 001	<b>Transaction ID : B-S-3769</b>  <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 56 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.65
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3774</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 20.01
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3791</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.42
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3741</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 57 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.65
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3767</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.87
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3748</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 14.91
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3756</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 58 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481			Amount of Each Disbursement this Period ..... 14.91
City Dallas	State TX	Zip Code 75266-0481	
Purpose of Disbursement Express Shipping		Candidate Name	Transaction ID : B-S-3758
Category/Type 001			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481			Amount of Each Disbursement this Period ..... 16.42
City Dallas	State TX	Zip Code 75266-0481	
Purpose of Disbursement Express Shipping		Candidate Name	Transaction ID : B-S-3760
Category/Type 001			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481			Amount of Each Disbursement this Period ..... 49.65
City Dallas	State TX	Zip Code 75266-0481	
Purpose of Disbursement Express Shipping		Candidate Name	Transaction ID : B-S-3768
Category/Type 001			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 0.00
<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)	PAGE 59 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.65
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3770</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.87
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3747</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 14.91
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3751</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 60 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 49.87
City Dallas	State TX	Zip Code 75266-0481
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3757	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 14.91
City Dallas	State TX	Zip Code 75266-0481
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3759	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 14.91
City Dallas	State TX	Zip Code 75266-0481
Purpose of Disbursement Express Shipping	Category/ Type 001	
Candidate Name	Transaction ID : B-S-3742	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 61 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 891.73
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3773</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 1137.97
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3726</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Cab Fare	<b>Transaction ID : B-S-3766</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 62 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Cab Fare	Transaction ID : B-S-3772
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Cab Fare	Transaction ID : B-S-3775
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Cab Fare	Transaction ID : B-S-3745
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 63 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18 <b>Transaction ID : B-S-3755</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18 <b>Transaction ID : B-S-3790</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Cab Fare 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Grand Rental Station</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 115 West College Street		Amount of Each Disbursement this Period 2849.19 <b>Transaction ID : B-S-3780</b>
City Lake Charles State LA Zip Code 70605	Purpose of Disbursement Equipment Rental 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 64 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Grand Rental Station</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 115 West College Street		Amount of Each Disbursement this Period 2859.37
City Lake Charles	State LA	
Zip Code 70605	Purpose of Disbursement Equipment Rental	Transaction ID : B-S-3781
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Glass with a Twist</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 860 Maestro Drive Suite A		Amount of Each Disbursement this Period 413.55
City Reno	State NV	
Zip Code 89511	Purpose of Disbursement Gifts & Mementos	Transaction ID : B-S-3779
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Constitution Avenue, NW		Amount of Each Disbursement this Period 386.1
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Catering	Transaction ID : B-S-3752
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 65 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steak</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 101 Constitution Avenue, NW			Amount of Each Disbursement this Period 643.5	
City Washington	State DC	Zip Code 20001	Transaction ID : B-S-3729	
Purpose of Disbursement Catering		Category/ Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Charlie Palmer Steak</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 101 Constitution Avenue, NW			Amount of Each Disbursement this Period 567.88	
City Washington	State DC	Zip Code 20001	Transaction ID : B-S-3789	
Purpose of Disbursement Catering		Category/ Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steak</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 101 Constitution Avenue, NW			Amount of Each Disbursement this Period 496.95	
City Washington	State DC	Zip Code 20001	Transaction ID : B-S-3765	
Purpose of Disbursement Catering		Category/ Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/09/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 66 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Constitution Avenue, NW		Amount of Each Disbursement this Period 264.99
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3771</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Constitution Avenue, NW		Amount of Each Disbursement this Period 624.2
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3732</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Constitution Avenue, NW		Amount of Each Disbursement this Period 461.54
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3734</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 67 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Charlie Palmer Steak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 101 Constitution Avenue, NW		Amount of Each Disbursement this Period 856.57
City Washington State DC Zip Code 20001	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3736</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Creative Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 100 Oak Street		Amount of Each Disbursement this Period 1643.06
City Lebanon State TN Zip Code 37087	Purpose of Disbursement Printing 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3727</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Creative Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 100 Oak Street		Amount of Each Disbursement this Period 684.75
City Lebanon State TN Zip Code 37087	Purpose of Disbursement Printing 003 Category/Type	
Candidate Name		<b>Transaction ID : B-S-3776</b> <b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 68 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Creative Graphics</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 100 Oak Street		Amount of Each Disbursement this Period 7500
City Lebanon	State TN	Zip Code 37087
Purpose of Disbursement Printing	Category/ Type 003	
Candidate Name		Transaction ID : B-S-3778  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Creative Graphics</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 100 Oak Street		Amount of Each Disbursement this Period 569.8
City Lebanon	State TN	Zip Code 37087
Purpose of Disbursement Printing	Category/ Type 003	
Candidate Name		Transaction ID : B-S-3777  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal City Catering</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 4088 Howard Avenue		Amount of Each Disbursement this Period 3010.98
City Kensington	State MD	Zip Code 20895
Purpose of Disbursement Catering	Category/ Type 003	
Candidate Name		Transaction ID : B-S-3763  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 69 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Margarita Man</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2704 South Nelson Street		Amount of Each Disbursement this Period 642.84
City Arlington	State VA	Zip Code 22206
Purpose of Disbursement Refreshments	Category/ Type 003	
Candidate Name		Transaction ID : B-S-3785  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Margarita Man</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2704 South Nelson Street		Amount of Each Disbursement this Period 220
City Arlington	State VA	Zip Code 22206
Purpose of Disbursement Refreshments	Category/ Type 003	
Candidate Name		Transaction ID : B-S-3784  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Concord Technologies</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 101 Stewart Street Suite 1000		Amount of Each Disbursement this Period 65
City Seattle	State WA	Zip Code 98101-2411
Purpose of Disbursement Blast E-Mail Service	Category/ Type 001	
Candidate Name		Transaction ID : B-S-3743  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 70 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Concord Technologies</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 101 Stewart Street Suite 1000		Amount of Each Disbursement this Period 65
City Seattle State WA Zip Code 98101-2411	Purpose of Disbursement Blast E-Mail Service 001 Category/Type	
Candidate Name		Transaction ID : B-S-3762  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bibiana</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 1100 New York Avenue NW		Amount of Each Disbursement this Period 3464.12
City Washington State DC Zip Code 20005	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-3730  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Social Reform</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 401 9th Street NW Market Square North		Amount of Each Disbursement this Period 165
City Washington State DC Zip Code 20004	Purpose of Disbursement Catering 003 Category/Type	
Candidate Name		Transaction ID : B-S-3738  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 71 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Social Reform</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 401 9th Street NW Market Square North		Amount of Each Disbursement this Period 713.46
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3739</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Social Reform</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 401 9th Street NW Market Square North		Amount of Each Disbursement this Period 541.21
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3749</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sonoma</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 223 Pennsylvania SE		Amount of Each Disbursement this Period 2961.11
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Catering	<b>Transaction ID : B-S-3744</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 72 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Gravatt Entertainment</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1700 Caroline Street Suite A		Amount of Each Disbursement this Period 1595
City Fredericksburg	State VA Zip Code 22401	
Purpose of Disbursement Musical Entertainment	Category/Type 003	<b>Transaction ID : B-S-3782</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Hayden's Liquor Store</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 700 North Carolina Avenue SE		Amount of Each Disbursement this Period 253.98
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Refreshments	Category/Type 003	<b>Transaction ID : B-S-3783</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mixed Bag Designs</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1744 Rollins Road		Amount of Each Disbursement this Period 495
City Burlingame	State CA Zip Code 94010	
Purpose of Disbursement Banners & Signs	Category/Type 006	<b>Transaction ID : B-S-3786</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 73 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Perfect Settings</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1851 South Club Drive #2		Amount of Each Disbursement this Period 1732.23
City Hyattsville	State MD	Zip Code 20785
Purpose of Disbursement Facility Rental	Category/Type 003	
Candidate Name	Transaction ID : B-S-3787	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Perlis Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 6055 Magazine Street		Amount of Each Disbursement this Period 375.21
City New Orleans	State LA	Zip Code 70118
Purpose of Disbursement Gifts & Mementos	Category/Type 003	
Candidate Name	Transaction ID : B-S-3788	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DC Taxicab Commission</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Cab Fare	Category/Type 002	
Candidate Name	Transaction ID : B-S-3731	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 74 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DC Taxicab Commission</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 15
City Washington State DC Zip Code 20004	Purpose of Disbursement Cab Fare	
Candidate Name	Category/Type 002	Transaction ID : B-S-3733  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC Taxicab Commission</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 18
City Washington State DC Zip Code 20004	Purpose of Disbursement Cab Fare	
Candidate Name	Category/Type 002	Transaction ID : B-S-3735  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DC Taxicab Commission</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE		Amount of Each Disbursement this Period 15
City Washington State DC Zip Code 20004	Purpose of Disbursement Cab Fare	
Candidate Name	Category/Type 002	Transaction ID : B-S-3737  [MEMO ITEM] Subitemization of The Levatino Group(07/09/14)
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 75 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. DC Taxicab Commission</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE			Amount of Each Disbursement this Period 18
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Cab Fare	Candidate Name		<b>Transaction ID : B-S-3750</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 002		<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)

Full Name (Last, First, Middle Initial) <b>B. DC Taxicab Commission</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE			Amount of Each Disbursement this Period 18
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Cab Fare	Candidate Name		<b>Transaction ID : B-S-3764</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 002		<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)

Full Name (Last, First, Middle Initial) <b>c. DC Taxicab Commission</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2014
Mailing Address 2041 MLK Jr. Avenue SE			Amount of Each Disbursement this Period 18
City Washington	State DC	Zip Code 20004	
Purpose of Disbursement Cab Fare	Candidate Name		<b>Transaction ID : B-S-3740</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type 002		<b>[MEMO ITEM]</b> Subitemization of The Levatino Group(07/09/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 76 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Complete Campaigns</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014	
Mailing Address 205 Pennsylvania Avenue SE			Amount of Each Disbursement this Period 450	
City Washington	State DC	Zip Code 20003	Transaction ID : B-E-26069	
Purpose of Disbursement Software Service		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LWCC</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014	
Mailing Address PO Box 61005			Amount of Each Disbursement this Period 94	
City New Orleans	State LA	Zip Code 70161	Transaction ID : B-E-26068	
Purpose of Disbursement Insurance		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014	
Mailing Address 7901 Wisconsin Avenue			Amount of Each Disbursement this Period 66.61	
City Bethesda	State MD	Zip Code 20814	Transaction ID : B-E-26271	
Purpose of Disbursement Banking Service Fees		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	610.61
<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)	PAGE 77 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 105262		Amount of Each Disbursement this Period 221.43 <b>Transaction ID : B-E-26072</b>
City Atlanta	State GA	
Zip Code 30348	Purpose of Disbursement Cellular Phone Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Lafayette Utilities System</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 4024		Amount of Each Disbursement this Period 240.72 <b>Transaction ID : B-E-26078</b>
City Lafayette	State LA	
Zip Code 70502-4024	Purpose of Disbursement Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Lowrys Printing &amp; Copying</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 2004 West Pinhook Road		Amount of Each Disbursement this Period 4269.34 <b>Transaction ID : B-E-26071</b>
City Lafayette	State LA	
Zip Code 70508-3228	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4731.49
<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)	PAGE 78 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Lowrys Printing &amp; Copying</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 2004 West Pinhook Road		Amount of Each Disbursement this Period 93.96
City Lafayette State LA Zip Code 70508-3228	Purpose of Disbursement General Office Supplies	
Candidate Name	Category/Type 001	<b>Transaction ID : B-S-3792</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Lowrys Printing & Copying(07/14/14)

Full Name (Last, First, Middle Initial) <b>B. Lowrys Printing &amp; Copying</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 2004 West Pinhook Road		Amount of Each Disbursement this Period 3285.99
City Lafayette State LA Zip Code 70508-3228	Purpose of Disbursement Direct Mail	
Candidate Name	Category/Type 003	<b>Transaction ID : B-S-3793</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Lowrys Printing & Copying(07/14/14)

Full Name (Last, First, Middle Initial) <b>c. Lowrys Printing &amp; Copying</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 2004 West Pinhook Road		Amount of Each Disbursement this Period 889.39
City Lafayette State LA Zip Code 70508-3228	Purpose of Disbursement Printing	
Candidate Name	Category/Type 001	<b>Transaction ID : B-S-3794</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Lowrys Printing & Copying(07/14/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 79 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Total HR Solutions LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 935 Camellia Boulevard Suite 200		Amount of Each Disbursement this Period 7212.27
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 001	<b>Transaction ID : B-E-26157</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. Laura Ann D. Edwards</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 124 Acacia Drive		Amount of Each Disbursement this Period 1334.16
City Lafayette	State LA Zip Code 70508-4002	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3816</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/14/14)

Full Name (Last, First, Middle Initial) <b>c. Marilyn Lee</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 3399.66
City Lafayette	State LA Zip Code 70506-3334	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3818</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/14/14)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7212.27
<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)	PAGE 80 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Michael Hare</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014		
Mailing Address 107 Woodbranch Court			Amount of Each Disbursement this Period 384.8		
City Lafayette	State LA	Zip Code 70503	Transaction ID : B-S-3817		
Purpose of Disbursement Payroll		Category/ Type 001	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/14/14)		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Jack Pandol</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014		
Mailing Address 3603 S Street NW			Amount of Each Disbursement this Period 213.94		
City Washington	State DC	Zip Code 20007-2245	Transaction ID : B-S-3820		
Purpose of Disbursement Payroll		Category/ Type 001	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/14/14)		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Miles Ray</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014		
Mailing Address 200 Oakcrest Drive Apartment 212			Amount of Each Disbursement this Period 954.61		
City Lafayette	State LA	Zip Code 70503	Transaction ID : B-S-3821		
Purpose of Disbursement Payroll		Category/ Type 001	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/14/14)		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 81 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Ethan Melacon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 80126		Amount of Each Disbursement this Period 925.1
City Lafayette	State LA	
Zip Code 70598	Purpose of Disbursement Payroll	<b>Transaction ID : B-S-3819</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 1105 Moss Street		Amount of Each Disbursement this Period 220
City Lafayette	State LA	
Zip Code 70501-3601	Purpose of Disbursement Postage	<b>Transaction ID : B-E-26070</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Visa Business</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 31535		Amount of Each Disbursement this Period 4167.39
City Tampa	State FL	
Zip Code 33631-3535	Purpose of Disbursement SEE MEMO ITEMS	<b>Transaction ID : B-E-26073</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4387.39
<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)	PAGE 82 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Party Central, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 408 Maurice Street		Amount of Each Disbursement this Period 290.84
City Lafayette	State LA Zip Code 70506-5620	
Purpose of Disbursement Event Decorations	Category/Type 003	<b>Transaction ID : B-S-3809</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 1901 L Street NW		Amount of Each Disbursement this Period 27.53
City Washington	State DC Zip Code 20036-3506	
Purpose of Disbursement General Office Supplies	Category/Type 001	<b>Transaction ID : B-S-3811</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Champagne's Market</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 454 Heymann Boulevard		Amount of Each Disbursement this Period 172.69
City Lafayette	State LA Zip Code 70503	
Purpose of Disbursement Gifts & Mementos	Category/Type 006	<b>Transaction ID : B-S-3813</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 83 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Don's Specialty Meats</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 730 Interstate-10 South Frontage Road			Amount of Each Disbursement this Period 690.21	
City Scott	State LA	Zip Code 70583	Transaction ID : B-S-3796	
Purpose of Disbursement Catering		Category/ Type 003	[MEMO ITEM] Subitemization of Visa Business(07/14/14)	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Google</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 1600 Amphitheate Parkway			Amount of Each Disbursement this Period 58.21	
City Mountain View	State CA	Zip Code 94043	Transaction ID : B-S-3795	
Purpose of Disbursement Advertising		Category/ Type 004	[MEMO ITEM] Subitemization of Visa Business(07/14/14)	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 300 1st Street SE			Amount of Each Disbursement this Period 39.59	
City Washington	State DC	Zip Code 20003-1801	Transaction ID : B-S-3812	
Purpose of Disbursement Meal Expense		Category/ Type 001	[MEMO ITEM] Subitemization of Visa Business(07/14/14)	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 84 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. The French Press</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 214 East Vermillion Street		Amount of Each Disbursement this Period 42.72
City Lafayette	State LA Zip Code 70501	
Purpose of Disbursement Meal Expense	Category/Type 001	<b>Transaction ID : B-S-3805</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 172.75
City Dallas	State TX Zip Code 75266-0481	
Purpose of Disbursement Express Shipping	Category/Type 001	<b>Transaction ID : B-S-3806</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 1050 Connecticut Avenue NW		Amount of Each Disbursement this Period 30.07
City Washington	State DC Zip Code 20036-5303	
Purpose of Disbursement Postage	Category/Type 001	<b>Transaction ID : B-S-3800</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 85 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. U-Haul</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 26 K Street NE		Amount of Each Disbursement this Period 60.95
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Storage	Transaction ID : B-S-3798
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Business(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Beads and More</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 1809 Johnston Street		Amount of Each Disbursement this Period 611
City Lafayette	State LA	
Zip Code 70503	Purpose of Disbursement Parade Supplies	Transaction ID : B-S-3799
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Business(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 1601 Willow Road		Amount of Each Disbursement this Period 792.76
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Advertising	Transaction ID : B-S-3802
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Visa Business(07/14/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 86 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Indevert</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 551 Jefferson Street		Amount of Each Disbursement this Period ..... 45
City Lafayette	State LA Zip Code 70501	
Purpose of Disbursement Program Expense	Category/Type 001	<b>Transaction ID : B-S-3797</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Roosevelt New Orleans</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 130 Roosevelt Way		Amount of Each Disbursement this Period ..... 18
City New Orleans	State LA Zip Code 70119	
Purpose of Disbursement Parking Fee	Category/Type 002	<b>Transaction ID : B-S-3808</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cafe Vermilionville</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 1304 West Pinhook		Amount of Each Disbursement this Period ..... 816.88
City Lafayette	State LA Zip Code 70503	
Purpose of Disbursement Catering	Category/Type 003	<b>Transaction ID : B-S-3807</b>  <b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	..... 0.00
<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)	PAGE 87 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 60 Massachusetts Avenue NE		Amount of Each Disbursement this Period 259
City Washington	State DC	
Zip Code 20002-4285	Purpose of Disbursement Transportation	<b>Transaction ID : B-S-3814</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Visa Business(07/14/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charles W. Boustany Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 80218		Amount of Each Disbursement this Period 2338.67
City Lafayette	State LA	
Zip Code 70598	Purpose of Disbursement SEE MEMO ITEM	<b>Transaction ID : B-E-26075</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Warwick Hotel New York</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 65 West 54th Street		Amount of Each Disbursement this Period 2338.67
City New York	State NY	
Zip Code 10019	Purpose of Disbursement Lodging	<b>Transaction ID : B-S-3815</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Charles Boustany(07/14/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2338.67
<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)		PAGE 88 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Allied Waste Services</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address PO Box 9001099		Amount of Each Disbursement this Period 292.46 <b>Transaction ID : B-E-26080</b>
City Louisville	State KY	
Zip Code 40290-1099	Purpose of Disbursement Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. LWCC</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2014
Mailing Address PO Box 61005		Amount of Each Disbursement this Period 162 <b>Transaction ID : B-E-26079</b>
City New Orleans	State LA	
Zip Code 70161	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Iberia Bank</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 200 West Congress Street		Amount of Each Disbursement this Period 10 <b>Transaction ID : B-E-26274</b>
City Lafayette	State LA	
Zip Code 70501-6873	Purpose of Disbursement Banking Service Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	292.46
<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)	PAGE 89 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Usable Creative</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 218 Brahmwell Court		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-E-26084</b>
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement Web Hosting Fee	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Total HR Solutions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 935 Camellia Boulevard Suite 200		Amount of Each Disbursement this Period 2725.22 <b>Transaction ID : B-E-26158</b>
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 0.29 <b>Transaction ID : B-E-26152</b>
City Carol Stream	State IL Zip Code 60197-6463	
Purpose of Disbursement Cellular Phone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2825.51
<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)	PAGE 90 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Atmos Energy</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO Box 790311		Amount of Each Disbursement this Period 18.1 <b>Transaction ID : B-E-26151</b>
City Saint Louis	State MO	
Zip Code 63179-0311	Purpose of Disbursement Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Louisiana Shrimp &amp; Petroleum Festival</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO Box 103		Amount of Each Disbursement this Period 1100 <b>Transaction ID : B-E-26150</b>
City Morgan City	State LA	
Zip Code 70381	Purpose of Disbursement Program Expense	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. LWCC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO Box 61005		Amount of Each Disbursement this Period 369 <b>Transaction ID : B-E-26153</b>
City New Orleans	State LA	
Zip Code 70161	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1487.10
<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)	PAGE 91 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Matthew Aaron Agency</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 412 West University Avenue Suite 201			Amount of Each Disbursement this Period 1000	
City Lafayette	State LA	Zip Code 70506	Transaction ID : B-E-26154	
Purpose of Disbursement Strategic Campaign Consulting		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Sam's Club/GEGRB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address PO Box 530981			Amount of Each Disbursement this Period 46.12	
City Atlanta	State GA	Zip Code 30353	Transaction ID : B-E-26147	
Purpose of Disbursement Food & Beverages		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014	
Mailing Address PO Box 30844			Amount of Each Disbursement this Period 3888.36	
City Bethesda	State MD	Zip Code 20824-0844	Transaction ID : B-E-26160	
Purpose of Disbursement SEE MEMO ITEMS		Category/Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Original vendors exceeding reporting threshold itemized as memo transactions.	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4934.48
<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)	PAGE 92 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 3100
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	<b>Transaction ID : B-S-3822</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 60.25
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Printing	<b>Transaction ID : B-S-3825</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address PO Box 30844		Amount of Each Disbursement this Period 585
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement E-Merchant Fees	<b>Transaction ID : B-S-3826</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 93 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Extra Space Storage</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2014
Mailing Address 10590 Metropolitan Avenue		Amount of Each Disbursement this Period 40
City Kensington	State MD	
Zip Code 20895	Purpose of Disbursement Storage	<b>Transaction ID : B-S-3823</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2014
Mailing Address 1050 Connecticut Avenue NW		Amount of Each Disbursement this Period 49
City Washington	State DC	
Zip Code 20036-5303	Purpose of Disbursement Postage	<b>Transaction ID : B-S-3827</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement MM / DD / YYYY 07 / 23 / 2014
Mailing Address PO Box 660481		Amount of Each Disbursement this Period 54.11
City Dallas	State TX	
Zip Code 75266-0481	Purpose of Disbursement Express Shipping	<b>Transaction ID : B-S-3824</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(07/23/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 94 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014	
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 50	
City Dallas	State TX	Zip Code 75266	Transaction ID : B-E-26188	
Purpose of Disbursement Cellular Phone Service		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Chris Kidder</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014	
Mailing Address 920 Kaliste Saloom Road			Amount of Each Disbursement this Period 2600	
City Lafayette	State LA	Zip Code 70508-4902	Transaction ID : B-E-26189	
Purpose of Disbursement Rent		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address PO Box 105262			Amount of Each Disbursement this Period 565.94	
City Atlanta	State GA	Zip Code 30348	Transaction ID : B-E-26191	
Purpose of Disbursement Cellular Phone Service		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3215.94
<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)	PAGE 95 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Cox Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO Box 60001		Amount of Each Disbursement this Period 5,000.00 115.49
City New Orleans	State LA	
Zip Code 70160	Purpose of Disbursement Utilities	Transaction ID : B-E-26196
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ronny Theriot's Community Project Fund, NPC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 216 Teresa Drive		Amount of Each Disbursement this Period 5,000.00 250
City St. Martinville	State LA	
Zip Code 70582	Purpose of Disbursement Advertising	Transaction ID : B-E-26195
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Total HR Solutions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 935 Camellia Boulevard Suite 200		Amount of Each Disbursement this Period 5,000.00 5200.4
City Lafayette	State LA	
Zip Code 70508	Purpose of Disbursement SEE MEMO ITEMS	Transaction ID : B-E-26220
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5565.89
<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)	PAGE 96 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Marilyn Lee</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1387.82
City Lafayette	State LA Zip Code 70506-3334	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3832</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Laura Ann D. Edwards</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 124 Acacia Drive		Amount of Each Disbursement this Period 1334.15
City Lafayette	State LA Zip Code 70508-4002	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3830</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/30/14)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ethan Melacon</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address PO Box 80126		Amount of Each Disbursement this Period 925.1
City Lafayette	State LA Zip Code 70598	
Purpose of Disbursement Payroll	Category/Type 001	<b>Transaction ID : B-S-3833</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Subitemization of Total HR Solutions LLC(07/30/14)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)		PAGE 97 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Michael Hare</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 107 Woodbranch Court		Amount of Each Disbursement this Period 384.79
City Lafayette	State LA	Zip Code 70503
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Transaction ID : B-S-3831	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/30/14)	

Full Name (Last, First, Middle Initial) <b>B. Miles Ray</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 200 Oakcrest Drive Apartment 212		Amount of Each Disbursement this Period 954.61
City Lafayette	State LA	Zip Code 70503
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Transaction ID : B-S-3835	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/30/14)	

Full Name (Last, First, Middle Initial) <b>c. Jack Pandol</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 3603 S Street NW		Amount of Each Disbursement this Period 213.93
City Washington	State DC	Zip Code 20007-2245
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Transaction ID : B-S-3834	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Subitemization of Total HR Solutions LLC(07/30/14)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<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)	PAGE 98 OF 101			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Ethan J. Melancon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2314 Kaliste Saloom Road Apartment 1003		Amount of Each Disbursement this Period 125.59
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement SEE MEMO ITEMS	Category/Type 002	<b>Transaction ID : B-E-26194</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>B. Ethan J. Melancon</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2314 Kaliste Saloom Road Apartment 1003		Amount of Each Disbursement this Period 116.55
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement Reimbursed- Mileage	Category/Type 002	<b>Transaction ID : B-S-3828</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b> Subitemization of Ethan Melancon(07/30/14)

Full Name (Last, First, Middle Initial) <b>c. Total HR Solutions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 935 Camellia Boulevard Suite 200		Amount of Each Disbursement this Period 62.92
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement Payroll Fees	Category/Type 001	<b>Transaction ID : B-E-26221</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	188.51
<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)	PAGE 99 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. Total HR Solutions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 935 Camellia Boulevard Suite 200		Amount of Each Disbursement this Period 856 <b>Transaction ID : B-E-26222</b>
City Lafayette	State LA Zip Code 70508	
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. State of Louisiana</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address PO Box 66788		Amount of Each Disbursement this Period 196.08 <b>Transaction ID : B-E-26307</b>
City Baton Rouge	State LA Zip Code 70896-6788	
Purpose of Disbursement Payroll Taxes	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1052.08
<b>TOTAL</b> This Period (last page this line number only).....	132471.90

**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 100 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 100000 <b>Transaction ID : B-E-26063</b>
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Political Contribution 011 Category/Type	
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Empowering the Community for Excellence</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO Box 1818		Amount of Each Disbursement this Period 250 <b>Transaction ID : B-E-26076</b>
City Crowley State LA Zip Code 70526	Purpose of Disbursement Charitable Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Miles Perret Cancer Services</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address PO Box 80763		Amount of Each Disbursement this Period 1500 <b>Transaction ID : B-E-26148</b>
City Lafayette State LA Zip Code 70598	Purpose of Disbursement Charitable Donation 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	101750.00
<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)	PAGE 101 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Charles Boustany Jr. MD for Congress, Inc.**

Full Name (Last, First, Middle Initial) <b>A. University of Louisiana Foundation</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014		
Mailing Address PO Box 44290			Amount of Each Disbursement this Period 1250		
City Lafayette	State LA	Zip Code 70504	Transaction ID : B-E-26149		
Purpose of Disbursement Charitable Donation		012 Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	103000.00