

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Fleming For Congress

ADDRESS (number and street) P.O. Box 1236

Check if different than previously reported. (ACC)

Minden LA 71058

2. **FEC IDENTIFICATION NUMBER** C00445015

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

CITY STATE ZIP CODE STATE DISTRICT

LA 04

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 _____ in the State of _____

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

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

Election on _____ in the State of _____

5. Covering Period 10 01 2009 through 12 31 2009

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 John Calvin Fleming, III

Signature of Treasurer Electronically Filed by John Calvin Fleming, III Date 01 31 2010

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Fleming For Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<hr/>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	101803.60	752926.73
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	101803.60	748126.73
<hr/>		
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	87895.35	554543.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	226.89	4664.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87668.46	549878.95
<hr/>		
8. Cash on Hand at Close of Reporting Period (from Line 27).....	180651.48	
<hr/>		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
<hr/>		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	695152.13	

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
Fleming For Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

59670.00

520149.69

(ii) Unitemized.....

7073.00

29869.00

(iii) TOTAL of contributions

66743.00

550018.69

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

35060.60

202908.04

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

101803.60

752926.73

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

100.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

100.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

226.89

4664.75

15. OTHER RECEIPTS
(Dividends, Interest, etc.).....

0.00

5000.31

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

102030.49

762691.79

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	87895.35	554543.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	4800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4800.00
21. OTHER DISBURSEMENTS.....	14510.00	15408.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	102405.35	574751.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	181026.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	102030.49
25. SUBTOTAL (add Line 23 and Line 24).....	283056.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	102405.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	180651.48

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Ophthalmology PAC
Mailing Address 1101 Vermont Ave NW Ste 700

City State Zip Code
Washington DC 20005-3526

FEC ID number of contributing federal political committee. **C** C70003785

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 9

Transaction ID: 00107.C2449

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
American Assoc of Clinical Urologist PAC
Mailing Address 1111 N Plaza Dr Ste 550

City State Zip Code
Schaumburg IL 60173-4946

FEC ID number of contributing federal political committee. **C** C00273003

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 9

Transaction ID: 91230.C2385

Amount of Each Receipt this Period
1500.00

Receipt

C. Full Name (Last, First, Middle Initial)
American Bankers Association PAC
Mailing Address 1120 Connecticut Ave NW

City State Zip Code
Washington DC 20036-3905

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 18000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 3 / 2 0 0 9

Transaction ID: 91230.C2431

Amount of Each Receipt this Period
2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
American College of Radiology Assoc PAC
Mailing Address 1891 Preston White Dr

City State Zip Code
Reston VA 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 9
Transaction ID: 91230.C2391
 Amount of Each Receipt this Period
 2000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
American Physical Therapy Assn PAC
Mailing Address 1111 N Fairfax St

City State Zip Code
Alexandria VA 22314-1484

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 9
Transaction ID: 91230.C2390
 Amount of Each Receipt this Period
 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
American Psychiatric Association PAC
Mailing Address 1000 Wilson Blvd Ste 1825

City State Zip Code
Arlington VA 22209-3924

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9
Transaction ID: 00107.C2453
 Amount of Each Receipt this Period
 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists
Mailing Address 520 N Northwest Hwy
City State Zip Code
Park Ridge IL 60068-2538
FEC ID number of contributing federal political committee. **C** C00255752
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 9
Transaction ID: 91230.C2341
Amount of Each Receipt this Period
1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
ARPAC
Mailing Address 451 Florida St
City State Zip Code
Baton Rouge LA 70801-1700
FEC ID number of contributing federal political committee. **C** C00226472
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9
Transaction ID: 91230.C2392
Amount of Each Receipt this Period
500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Boeing PAC
Mailing Address 1200 Wilson Blvd
City State Zip Code
Arlington VA 22209-2305
FEC ID number of contributing federal political committee. **C** C00142711
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9
Transaction ID: 91230.C2356
Amount of Each Receipt this Period
1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Coco-Cola Employee Nonpartisan Committee
Mailing Address 310 North Ave NW

City Atlanta State GA Zip Code 30313-2420

FEC ID number of contributing federal political committee. C C00012468

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 9
Transaction ID: 91008.C2154
 Amount of Each Receipt this Period 1000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Committee for the Advancement of Cotton
Mailing Address P.O. Box 2995

City State Zip Code 38088

FEC ID number of contributing federal political committee. C C00023028

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 9
Transaction ID: 91230.C2424
 Amount of Each Receipt this Period 1000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Conocophillips Spirit PAC
Mailing Address 1010A Plaza Ofc Bldg

City Bartlesville State OK Zip Code 74004-0001

FEC ID number of contributing federal political committee. C C00112896

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼
 General 2008

Election Cycle-to-Date ▼ 3000.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 9
Transaction ID: 91230.C2373
 Amount of Each Receipt this Period 1000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Continuing a Majority PAC
Mailing Address 5915 Eastman Ave Ste 100

City State Zip Code
Midland MI 48640-6824

FEC ID number of contributing federal political committee. **C** C00350462

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: 00107.C2452

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Crescent River Port Pilots Assoc. PAC
Mailing Address 8712 Highway 23

City State Zip Code
Belle Chasse LA 70037-2228

FEC ID number of contributing federal political committee. **C** C00221077

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 9

Transaction ID: 91230.C2257

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Davita Inc PAC
Mailing Address 601 Hawaii St

City State Zip Code
El Segundo CA 90245-4814

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 9

Transaction ID: 00119.C2456

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Freeport McMoran Copper & Gold Citizens
Mailing Address 1 N Central Ave
City Phoenix State AZ Zip Code 85004-4414
FEC ID number of contributing federal political committee. **C** C00320101
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 16 / 2009
Transaction ID: 91230.C2317
Amount of Each Receipt this Period 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Freshmen PAC
Mailing Address PO Box 1635
City Alexandria State VA Zip Code 22313
FEC ID number of contributing federal political committee. **C** C00383901
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 12 / 01 / 2009
Transaction ID: 91230.C2360
Amount of Each Receipt this Period 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Jones, Walker, Waechter etal PAC
Mailing Address 201 Saint Charles Ave Fl 49
City New Orleans State LA Zip Code 70170-1000
FEC ID number of contributing federal political committee. **C** C00111534
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 19 / 2009
Transaction ID: 91230.C2339
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
National Comm. Pharmacists Assn. PAC
Mailing Address 100 Daingerfield Rd
City Alexandria State VA Zip Code 22314-6302
FEC ID number of contributing federal political committee. **C** C00030809
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00
Date of Receipt 12 / 31 / 2009
Transaction ID: 00107.C2454
Amount of Each Receipt this Period 2500.00
Receipt

B. Full Name (Last, First, Middle Initial)
National Restaurant Association PAC
Mailing Address 1200 17th St NW
City Washington State DC Zip Code 20036-3004
FEC ID number of contributing federal political committee. **C** C00003764
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 01 / 2009
Transaction ID: 91230.C2363
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Neurosurgery PAC
Mailing Address 725 15th St NW Ste 500
City Washington State DC Zip Code 20005-2152
FEC ID number of contributing federal political committee. **C** C00413955
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 11 / 02 / 2009
Transaction ID: 91230.C2223
Amount of Each Receipt this Period 2000.00
Receipt

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Physician Hospitals of America
Mailing Address 2600 S Minnesota Ave Ste 202
City State Zip Code
Sioux Falls SD 57105-4731
FEC ID number of contributing federal political committee. **C** C00394163
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 9 / 2 0 0 9
Transaction ID: 91230.C2342
Amount of Each Receipt this Period
1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Physician Hospitals of America
Mailing Address 2600 S Minnesota Ave Ste 202
City State Zip Code
Sioux Falls SD 57105-4731
FEC ID number of contributing federal political committee. **C** C00394163
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 4 / 2 0 0 9
Transaction ID: 91230.C2393
Amount of Each Receipt this Period
1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
PricewaterhouseCoopers PAC
Mailing Address 1301 K St NW Ste 800
City State Zip Code
Washington DC 20005-3317
FEC ID number of contributing federal political committee. **C** C00107235
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9
Transaction ID: 91230.C2423
Amount of Each Receipt this Period
1500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 61
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Realtors PAC	Date of Receipt
	Mailing Address 430 N Michigan Ave	<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City State Zip Code Chicago IL 60611-4011	Transaction ID: 91230.C2425
	FEC ID number of contributing federal political committee. <input type="text" value="C00030718"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Election Cycle-to-Date ▼ <input type="text" value="6000.00"/>

B.	Full Name (Last, First, Middle Initial) Shaw Group, Inc. PAC	Date of Receipt
	Mailing Address 1725 Duke St Ste 400	<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City State Zip Code Alexandria VA 22314-3470	Transaction ID: 91230.C2340
	FEC ID number of contributing federal political committee. <input type="text" value="C00104885"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Election Cycle-to-Date ▼ <input type="text" value="3000.00"/>

C.	Full Name (Last, First, Middle Initial) UPS PAC	Date of Receipt
	Mailing Address 55 Glenlake Pkwy NE	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City State Zip Code Atlanta GA 30328-3474	Transaction ID: 91230.C2194
	FEC ID number of contributing federal political committee. <input type="text" value="C00064766"/>	Amount of Each Receipt this Period <input type="text" value="2060.60"/>
	Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Receipt Election Cycle-to-Date ▼ <input type="text" value="4060.60"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4060.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 61
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Wendys Arbys Groups PAC

Mailing Address 4299 W Dublin Granville Rd

City State Zip Code
Dublin OH 43017-1440

FEC ID number of contributing federal political committee. **C** c00369090

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 9

Transaction ID: 91230.C2362

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	35060.60

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
James Bergeron
Mailing Address 612 Loch Ridge Dr
City Shreveport State LA Zip Code 71106-6829
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 10 / 14 / 2009
Transaction ID: 91019.C2166
Amount of Each Receipt this Period 2400.00
Receipt

B. Full Name (Last, First, Middle Initial)
B.L. Bickham
Mailing Address 7087 Jefferson Paige Rd
City Shreveport State LA Zip Code 71119-8852
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 11 / 04 / 2009
Transaction ID: 91230.C2415
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Bobbie Bishop
Mailing Address 108 Springtree Dr
City Brandon State MS Zip Code 39042-2300
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt 12 / 31 / 2009
Transaction ID: 00107.C2455
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 3150.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 61

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Joseph Bolin

Mailing Address 18327 Frankford Lakes Cir

City State Zip Code
Dallas TX 75252-7949

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

Name of Employer Occupation
Self Employed Physician

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: 91230.C2374

Amount of Each Receipt this Period

500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
G S Butler

Mailing Address 929 N Main St

City State Zip Code
Homer LA 71040-3845

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

Name of Employer Occupation
None Retired

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 4400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 9

Transaction ID: 91230.C2208

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
R. Valmore Byles

Mailing Address 1751 Robby St

City State Zip Code
Many LA 71449-3361

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

Name of Employer Occupation
RV Byles Enterprises Contractor

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

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: 91230.C2305

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Paul Cambon

Mailing Address 908 Croton Dr

City State Zip Code
Alexandria VA 22308-2001

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

Name of Employer Occupation
The Livingston Group Partner

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

Date of Receipt
MM / DD / YYYY
11 / 19 / 2009

Transaction ID: 91230.C2337

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Martin Cancienne

Mailing Address PO Box 36

City State Zip Code
Belle Rose LA 70341-0036

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

Name of Employer Occupation
DMC Constructors, LLC Government Relations

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

Date of Receipt
MM / DD / YYYY
11 / 19 / 2009

Transaction ID: 91230.C2338

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
R. Dewith Carrier

Mailing Address PO Box 663

City State Zip Code
Oberlin LA 70655-0663

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

Name of Employer Occupation
Self Employed Business Owner

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

Date of Receipt
MM / DD / YYYY
11 / 16 / 2009

Transaction ID: 91230.C2318

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Merritt Chastain

Mailing Address 8570 Business Park Dr

City State Zip Code
Shreveport LA 71105-5695

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: 91230.C2355

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Peggy Dempsey

Mailing Address 205 S. Spruce

City State Zip Code
Vivian LA 71082

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 9

Transaction ID: 91230.C2326

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Dodson

Mailing Address 1605 Emberly Oaks Dr

City State Zip Code
Alexandria LA 71301-2785

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

Name of Employer Comprehensive Neurosurgery Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 9

Transaction ID: 91230.C2394

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
John Evans

Mailing Address 2520 Benton Road

City State Zip Code
Bossier City LA 71111

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 9

Transaction ID: 91230.C2231

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Carlton Foster

Mailing Address 801 Coulee Kinney Rd

City State Zip Code
Abbeville LA 70510-3435

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 0 / 2 0 0 9

Transaction ID: 91230.C2345

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Philip Garavaglia

Mailing Address 1089 Capilano Dr

City State Zip Code
Shreveport LA 71106-8264

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

Name of Employer Self-Employed Occupation
Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 9

Transaction ID: 91230.C2262

Amount of Each Receipt this Period
2400.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2700.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
William Golden

Mailing Address 1050 North Pointe Circle

City State Zip Code
Shreveport LA 71106

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

Name of Employer Occupation
G&G Trucking Executive

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 9

Transaction ID: 91008.C2152

Amount of Each Receipt this Period
2400.00

Receipt

B. Full Name (Last, First, Middle Initial)
Gregory Hamer

Mailing Address 805 Pine St

City State Zip Code
Morgan City LA 70380-1826

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

Name of Employer Occupation
B & G Food Enterprise, LLC Executive

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 9

Transaction ID: 91230.C2334

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Hardin

Mailing Address 410 Briarwood

City State Zip Code
Shreveport LA 71106

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

Name of Employer Occupation
Information Requested Physician

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 91230.C2181

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **3900.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Henry Hearne
Mailing Address PO Box 121
City State Zip Code
Shreveport LA 71161
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Farmer
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 11 / 03 / 2009
Transaction ID: 91230.C2274
Amount of Each Receipt this Period 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
David Hilton
Mailing Address 832 Robinson Pl
City State Zip Code
Shreveport LA 71104-3030
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1600.00
Date of Receipt 11 / 03 / 2009
Transaction ID: 91230.C2265
Amount of Each Receipt this Period 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Susan Hunter
Mailing Address 412 Pine St
City State Zip Code
Minden LA 71055-3120
FEC ID number of contributing federal political committee. **C**
Name of Employer Coca Cola Bottling Co. Occupation Owner
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 12 / 04 / 2009
Transaction ID: 91230.C2383
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 800.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Joan Ingram
Mailing Address 47053 Scott Dr

City State Zip Code
Hammond LA 70401-7324

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

Name of Employer Occupation
None Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 9

Transaction ID: 91230.C2329

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Frank Kelly
Mailing Address 4041 Woodway Dr

City State Zip Code
Benton LA 71006-9351

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

Name of Employer Occupation
Self Employed Healthcare Statesman

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 2 / 2 0 0 9

Transaction ID: 91230.C2323

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Norman Kinsey
Mailing Address 401 Edwards St Ste 1805

City State Zip Code
Shreveport LA 71101-5515

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

Name of Employer Occupation
Kinsey Interests, Inc. Executive

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 9

Transaction ID: 91230.C2429

Amount of Each Receipt this Period
1450.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
David Kirby
Mailing Address PO Box 245
City Hosston State LA Zip Code 71043-0245
FEC ID number of contributing federal political committee. **C**
Name of Employer Kirby Oil Company Occupation Owner
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 12 / 02 / 2009
Transaction ID: 91230.C2369
Amount of Each Receipt this Period 2400.00
Receipt

B. Full Name (Last, First, Middle Initial)
David Kirby
Mailing Address PO Box 245
City Hosston State LA Zip Code 71043-0245
FEC ID number of contributing federal political committee. **C**
Name of Employer Kirby Oil Company Occupation Owner
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 12 / 02 / 2009
Transaction ID: 91230.C2370
Amount of Each Receipt this Period 2400.00
Receipt

C. Full Name (Last, First, Middle Initial)
Larry LaBorde
Mailing Address 6658 Youree Dr Ste 180 Suite 180
City Shreveport State LA Zip Code 71105-4651
FEC ID number of contributing federal political committee. **C**
Name of Employer Silver Trading, Co Occupation Owner
Receipt For: 2010 Primary General Other (specify) ▼ Election Cycle-to-Date ▼ 1220.00
Date of Receipt 12 / 01 / 2009
Transaction ID: 91230.C2358
Amount of Each Receipt this Period 20.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 4820.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Judith Madden
Mailing Address 4907 Windermere Blvd
City Alexandria State LA Zip Code 71303-2459
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 450.00
Date of Receipt 11 / 06 / 2009
Transaction ID: 91230.C2308
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Charlie McBride
Mailing Address 1702 19th St NW
City Washington State DC Zip Code 20009-1606
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt 10 / 29 / 2009
Transaction ID: 91230.C2192
Amount of Each Receipt this Period 1000.00
Receipt

C. Full Name (Last, First, Middle Initial)
Richard Milner
Mailing Address 8280 Roxborough Loop
City Gainesville State VA Zip Code 20155-3207
FEC ID number of contributing federal political committee. **C**
Name of Employer UPS Store Occupation Franchisee
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 10 / 29 / 2009
Transaction ID: 91230.C2195
Amount of Each Receipt this Period 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1700.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Alan Murphy</p> <p>Mailing Address 400 Travis Street, Suite 1910</p> <p>City State Zip Code Shreveport LA 71101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Murco Oil and Gas Co-Owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 9</p> <p>Transaction ID: 91230.C2376</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Receipt</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Alan Murphy</p> <p>Mailing Address 400 Travis Street, Suite 1910</p> <p>City State Zip Code Shreveport LA 71101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Murco Oil and Gas Co-Owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 9</p> <p>Transaction ID: 91230.C2375</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Receipt</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Thomas Murphy</p> <p>Mailing Address 400 Travis Street, Suite 1910</p> <p>City State Zip Code Shreveport LA 71101</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Murco Oil and Gas Co-Owner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 9</p> <p>Transaction ID: 91230.C2380</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	7200.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 26 / 61
(check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Thomas Murphy

Mailing Address 400 Travis Street, Suite 1910

City State Zip Code
Shreveport LA 71101

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

Name of Employer Occupation
Murco Oil and Gas Co-Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 9

Transaction ID: 91230.C2381

Amount of Each Receipt this Period

2400.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Robert Nichols

Mailing Address 900 West 62 Street

City State Zip Code
Shreveport LA 71106

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

Name of Employer Occupation
Eagle Distributing of Shrevepo President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91019.C2164

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Ray Oden

Mailing Address 702 Thora Blvd

City State Zip Code
Shreveport LA 71106-1824

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

Name of Employer Occupation
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Transaction ID: 91230.C2238

Amount of Each Receipt this Period

900.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Ray Oden

Mailing Address 702 Thora Blvd

City State Zip Code
Shreveport LA 71106-1824

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

Name of Employer Occupation
None Retired

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

Amount of Each Receipt this Period
2500.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2009

Transaction ID: 91230.C2239

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Barry Phil Pasley

Mailing Address 1530 Leonard Road

City State Zip Code
Shreveport LA 71115

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

Name of Employer Occupation
Insurance Management Admi- UP
nistr

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

Amount of Each Receipt this Period
100.00

Date of Receipt
MM / DD / YYYY
10 / 29 / 2009

Transaction ID: 91230.C2168

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Barry Phil Pasley

Mailing Address 1530 Leonard Road

City State Zip Code
Shreveport LA 71115

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

Name of Employer Occupation
Insurance Management Admi- UP
nistr

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

Amount of Each Receipt this Period
200.00

Date of Receipt
MM / DD / YYYY
12 / 07 / 2009

Transaction ID: 91230.C2427

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Barry Phil Pasley
Mailing Address 1530 Leonard Road
City State Zip Code
Shreveport LA 71115
FEC ID number of contributing federal political committee. **C**
Name of Employer Insurance Management Administr
Occupation UP
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 9
Transaction ID: 91230.C2426
Amount of Each Receipt this Period
2300.00
Receipt

B. Full Name (Last, First, Middle Initial)
Hunt Powell
Mailing Address 160 Blazer Dr
City State Zip Code
Sibley LA 71073-2568
FEC ID number of contributing federal political committee. **C**
Name of Employer Vowell Development Group
Occupation Partner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
100.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 9
Transaction ID: 91013.C2158
Amount of Each Receipt this Period
100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Hunt Powell
Mailing Address 160 Blazer Dr
City State Zip Code
Sibley LA 71073-2568
FEC ID number of contributing federal political committee. **C**
Name of Employer Vowell Development Group
Occupation Partner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 9
Transaction ID: 91013.C2157
Amount of Each Receipt this Period
2400.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► **4800.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 29 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Austin Robertson

Mailing Address 5 Beaux Rivages Drive

City State Zip Code
Shreveport LA 71106

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

Name of Employer Occupation
Coles, Evans & Peterson CPA

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

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2009

Transaction ID: 91230.C2359

Amount of Each Receipt this Period
2400.00

Receipt

B. Full Name (Last, First, Middle Initial)
Wiliam Robinson

Mailing Address 830 Ockley Drive

City State Zip Code
Shreveport LA 71106

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

Name of Employer Occupation
Information Requested Information Requested

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

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 07 / 2009

Transaction ID: 91230.C2428

Amount of Each Receipt this Period
2400.00

Receipt

C. Full Name (Last, First, Middle Initial)
Phillip Rozeman

Mailing Address PO Box 1760

City State Zip Code
Shreveport LA 71166-1760

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

Name of Employer Occupation
Self-Employed Physician

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

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2009

Transaction ID: 91019.C2165

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **6300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 61 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Jean Simpson</p> <p>Mailing Address 308 Twin Point Dr</p> <p>City State Zip Code Benton LA 71006-8696</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self-Employed Occupation Businesswoman</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91230.C2432</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	3	/	2	0	0	9	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	2	3	/	2	0	0	9													
500.00																						

<p>B. Full Name (Last, First, Middle Initial) Craig Springmeyer</p> <p>Mailing Address 2905 North Point Drive</p> <p>City State Zip Code Shreveport LA 71106</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Highland Clinic Occupation Physician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91230.C2328</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	2	/	2	0	0	9	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	2	/	2	0	0	9													
250.00																						

<p>C. Full Name (Last, First, Middle Initial) Ray Spurlock</p> <p>Mailing Address 421 Homer Rd</p> <p>City State Zip Code Minden LA 71055-2933</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Employed Occupation Optometrist</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91230.C2278</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0	9	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	9													
100.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">850.00</td></tr></table>	850.00
850.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Mike Stanberry

Mailing Address 1214 Haven Avenue

City State Zip Code
Shreveport LA 71107

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

Name of Employer Metro Aviation, Inc Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 9

Transaction ID: 91230.C2309

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
H.e. Sutton

Mailing Address PO Box 639

City State Zip Code
Oil City LA 71061

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Transaction ID: 91230.C2224

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Phyllis Taylor

Mailing Address 1 Lee Cir

City State Zip Code
New Orleans LA 70130-3931

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

Name of Employer Taylor Energy Occupation Chairman of the Board

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 9

Transaction ID: 00107.C2448

Amount of Each Receipt this Period
2400.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Michael Vasko

Mailing Address 331 Jessie Jones Dr

City State Zip Code
Benton LA 71006-4212

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

Name of Employer Occupation
Spraymax Inc Manager

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91008.C2150

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Diane Wagner

Mailing Address 12030 Ashland Way

City State Zip Code
Shreveport LA 71106-9346

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

Name of Employer Occupation
Information Requested Information Requested

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 9

Transaction ID: 91230.C2191

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Frederick White

Mailing Address 444 Evangeline PI

City State Zip Code
Shreveport LA 71106-2314

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

Name of Employer Occupation
Cardiovascular Consultants Cardiologist

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 9

Transaction ID: 91230.C2422

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 61 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Richard White</p> <p>Mailing Address 5035 Macomb St NW</p> <p>City State Zip Code Washington DC 20016-2674</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Alpine Group Partner</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">250.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91008.C2153</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"></td><td>250.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	9		250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	9														
	250.00																						

<p>B. Full Name (Last, First, Middle Initial) Ralph Williams</p> <p>Mailing Address 1039 Ridgewood Circle</p> <p>City State Zip Code Minden LA 71055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Information Requested Information Requested</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">200.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91230.C2348</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"></td><td>200.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	9		200.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		2	4		2	0	0	9														
	200.00																						

<p>C. Full Name (Last, First, Middle Initial) Fred Willis</p> <p>Mailing Address PO Box 5219</p> <p>City State Zip Code Shreveport LA 71135-5219</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Physician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">200.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table> </p> <p>Transaction ID: 91230.C2384</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td style="width: 80%;"></td><td>100.00</td></tr> </table> </p> <p>Receipt</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	4		2	0	0	9		100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		0	4		2	0	0	9														
	100.00																						

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 34 / 61
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial)
Mike Woodard
Mailing Address PO Box 1178
City Minden State LA Zip Code 71058-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer Lincoln National Occupation Insurance
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 11 / 09 / 2009
Transaction ID: 00107.C2442
Amount of Each Receipt this Period 2400.00
Receipt

B. Full Name (Last, First, Middle Initial)
Mike Woodard
Mailing Address PO Box 1178
City Minden State LA Zip Code 71058-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer Lincoln National Occupation Insurance
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4300.00
Date of Receipt 11 / 09 / 2009
Transaction ID: 00107.C2441
Amount of Each Receipt this Period 1900.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mike Woodard
Mailing Address PO Box 1178
City Minden State LA Zip Code 71058-1178
FEC ID number of contributing federal political committee. **C**
Name of Employer Lincoln National Occupation Insurance
Receipt For: 2010
 Primary General
 Other (specify) ▼ General 2008 Election Cycle-to-Date ▼ 5000.00
Date of Receipt 11 / 09 / 2009
Transaction ID: 00107.C2443
Amount of Each Receipt this Period 700.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 5000.00
TOTAL This Period (last page this line number only) ► 59670.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 61	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full) Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Gannett	Date of Receipt
	Mailing Address PO Box 727	<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City State Zip Code Indianapolis IN 46206-0727	Transaction ID: 91230.C2289
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="226.89"/>
	Name of Employer Occupation	Offsets to Operating Expenditure
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="226.89"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="226.89"/>
TOTAL This Period (last page this line number only)	<input type="text" value="226.89"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1160 Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 29.05 CREDIT CARD FEES	
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1161 Date of Disbursement 10 / 02 / 2009 Amount of Each Disbursement this Period 27.00 CREDIT CARD FEES	
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00119.E1206 Date of Disbursement 10 / 27 / 2009 Amount of Each Disbursement this Period 4.95 CREDIT CARD FEES	

SUBTOTAL of Disbursements This Page (optional) ▶	61.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00119.E1207 Date of Disbursement 11 / 02 / 2009	Amount of Each Disbursement this Period 58.25 CREDIT CARD FEES
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00119.E1208 Date of Disbursement 11 / 27 / 2009	Amount of Each Disbursement this Period 4.95 CREDIT CARD FEES
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00119.E1209 Date of Disbursement 12 / 02 / 2009	Amount of Each Disbursement this Period 126.05 CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional) ▶	189.25
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

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

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91230.E1167
Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

2070.00

SOFTWARE

B.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 1923 Main St

City Franklin State LA Zip Code 70538-3117

Purpose of Disbursement
Transaction Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91019.E1139
Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

479.17

TRANSACTION FEES

C.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 1923 Main St

City Franklin State LA Zip Code 70538-3117

Purpose of Disbursement
Transaction Fees

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91230.E1162
Date of Disbursement

11 / 05 / 2009

Amount of Each Disbursement this Period

58.05

TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional) ▶

2607.22

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial) Bankcard Mailing Address 401 Main St City Minden State LA Zip Code 71055-3324 Purpose of Disbursement Transaction Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00107.E1202 Date of Disbursement 12 / 02 / 2009
	Amount of Each Disbursement this Period 245.73
	Category/Type
	TRANSACTION FEES
B. Full Name (Last, First, Middle Initial) Jewel Breard Mailing Address 496 Graham Rd City Leesville State LA Zip Code 71446-6937 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1141 Date of Disbursement 10 / 30 / 2009
	Amount of Each Disbursement this Period 461.75
	Category/Type
	SALARY
C. Full Name (Last, First, Middle Initial) Jewel Breard Mailing Address 496 Graham Rd City Leesville State LA Zip Code 71446-6937 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1170 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 461.75
	Category/Type
	SALARY

SUBTOTAL of Disbursements This Page (optional) ▶

1169.23

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 40 / 61

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Jewel Breard <hr/> Mailing Address 496 Graham Rd <hr/> City Leesville State LA Zip Code 71446-6937 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1197 Date of Disbursement 12 / 29 / 2009	Amount of Each Disbursement this Period 461.75 SALARY
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address 300 1st St SE <hr/> City Washington State DC Zip Code 20003-1801 <hr/> Purpose of Disbursement Event Catering Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1194 Date of Disbursement 12 / 03 / 2009	Amount of Each Disbursement this Period 96.08 EVENT CATERING
C.	Full Name (Last, First, Middle Initial) University Club of Caddo Parish <hr/> Mailing Address 401 Market Street, Suite 1500 <hr/> City Shreveport State LA Zip Code 71101- <hr/> Purpose of Disbursement Event Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1151 Date of Disbursement 10 / 15 / 2009	Amount of Each Disbursement this Period 3486.06 EVENT EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

4043.89

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Don Phillips</p> <p>Mailing Address 72022 Live Oak Street</p> <p>City State Zip Code LA 70433-</p> <p>Purpose of Disbursement Catering Services Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1193 Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 2360.81</p> <p>CATERING SERVICES EXPENSE</p>
<p>B. Full Name (Last, First, Middle Initial) John Fleming</p> <p>Mailing Address PO Box 1236</p> <p>City State Zip Code Minden LA 71058-1236</p> <p>Purpose of Disbursement Reimbursement for Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1159 Date of Disbursement 10 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 72.79</p> <p>REIMBURSEMENT FOR OFFICE SUPPLIES</p>
<p>C. Full Name (Last, First, Middle Initial) John Fleming</p> <p>Mailing Address PO Box 1236</p> <p>City State Zip Code Minden LA 71058-1236</p> <p>Purpose of Disbursement Reimbursement for Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1143 Date of Disbursement 10 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1656.46</p> <p>REIMBURSEMENT FOR TRAVEL</p>

SUBTOTAL of Disbursements This Page (optional)	4090.06
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Fleming Subway Restaurants	Transaction ID: 91230.E1158 Date of Disbursement 10 / 07 / 2009
	Mailing Address 119 Homer Rd	Amount of Each Disbursement this Period 47.58
	City Minden State LA Zip Code 71055-2731	
	Purpose of Disbursement Telephones Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TELEPHONES

B.	Full Name (Last, First, Middle Initial) Fleming Subway Restaurants	Transaction ID: 91230.E1157 Date of Disbursement 10 / 07 / 2009
	Mailing Address 119 Homer Rd	Amount of Each Disbursement this Period 860.08
	City Minden State LA Zip Code 71055-2731	
	Purpose of Disbursement Advertising Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		ADVERTISING

C.	Full Name (Last, First, Middle Initial) Fleming Subway Restaurants	Transaction ID: 91230.E1164 Date of Disbursement 11 / 13 / 2009
	Mailing Address 119 Homer Rd	Amount of Each Disbursement this Period 47.50
	City Minden State LA Zip Code 71055-2731	
	Purpose of Disbursement Telephones Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TELEPHONES

SUBTOTAL of Disbursements This Page (optional)	955.16
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Fleming Subway Restaurants</p> <p>Mailing Address 119 Homer Rd</p> <p>City Minden State LA Zip Code 71055-2731</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1188</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.24"/></p> <p>ADVERTISING</p>
<p>B. Full Name (Last, First, Middle Initial) Harland Clarke</p> <p>Mailing Address 10931 Laureate Dr</p> <p>City San Antonio State TX Zip Code 78249-3312</p> <p>Purpose of Disbursement Check Order</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1168</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.97"/></p> <p>CHECK ORDER</p>
<p>C. Full Name (Last, First, Middle Initial) Harland Clarke</p> <p>Mailing Address 10931 Laureate Dr</p> <p>City San Antonio State TX Zip Code 78249-3312</p> <p>Purpose of Disbursement Check Order Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1185</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.65"/></p> <p>CHECK ORDER FEE</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="165.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Lamb & Associates

Transaction ID: 91230.E1173
Date of Disbursement

Mailing Address 2315 Line Ave

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	9

City Shreveport State LA Zip Code 71104-2130

Amount of Each Disbursement this Period

654.41

Purpose of Disbursement
Office Supplies
Candidate Name

Category/ Type

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

OFFICE SUPPLIES

B.

Full Name (Last, First, Middle Initial)
Monogram Unlimited

Transaction ID: 91230.E1186
Date of Disbursement

Mailing Address 2114 Forsythe Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	9

City Monroe State LA Zip Code 71201-

Amount of Each Disbursement this Period

414.49

Purpose of Disbursement
Printing
Candidate Name

Category/ Type

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

PRINTING

C.

Full Name (Last, First, Middle Initial)
Moon Griffon Show

Transaction ID: 91230.E1196
Date of Disbursement

Mailing Address PO Box 211

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	0	9

City Monroe State LA Zip Code 71210-0211

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Media Buy
Candidate Name

Category/ Type

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

MEDIA BUY

SUBTOTAL of Disbursements This Page (optional)

2068.90

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Sondra Mott	Transaction ID: 91230.E1142 Date of Disbursement 10 / 02 / 2009
	Mailing Address 1919 Connecticut Ave NW	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20009-5701	
	Purpose of Disbursement Consulting Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONSULTING FEES

B.	Full Name (Last, First, Middle Initial) Sondra Mott	Transaction ID: 91230.E1199 Date of Disbursement 12 / 28 / 2009
	Mailing Address 1919 Connecticut Ave NW	Amount of Each Disbursement this Period 70.20
	City Washington State DC Zip Code 20009-5701	
	Purpose of Disbursement Postage Reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		POSTAGE REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Mystick Krewe Of Louisiana	Transaction ID: 91230.E1150 Date of Disbursement 10 / 15 / 2009
	Mailing Address PO Box 80518	Amount of Each Disbursement this Period 700.00
	City Baton Rouge State LA Zip Code 70898-0518	
	Purpose of Disbursement Event Ticket Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT TICKET

SUBTOTAL of Disbursements This Page (optional)	5770.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Nungesser Consulting</p> <p>Mailing Address 1554 Lobdell Ave</p> <p>City Baton Rouge State LA Zip Code 70806-8243</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00119.E1213</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">22172.07</td> </tr> </table> <p>FUNDRAISING CONSULTING</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	0	9	22172.07
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	0	9													
22172.07																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Olsen & Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd Ste 203</p> <p>City Austin State TX Zip Code 78701-1022</p> <p>Purpose of Disbursement List Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1149</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3307.50</td> </tr> </table> <p>LIST MANAGEMENT</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	0	9	3307.50
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	1	/	2	0	0	9													
3307.50																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Olsen & Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd Ste 203</p> <p>City Austin State TX Zip Code 78701-1022</p> <p>Purpose of Disbursement List Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1166</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">6466.92</td> </tr> </table> <p>LIST MANAGEMENT</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0	9	6466.92
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	3	/	2	0	0	9													
6466.92																						

SUBTOTAL of Disbursements This Page (optional) ►

31946.49

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A. Full Name (Last, First, Middle Initial) Olsen & Shuvalov <hr/> Mailing Address 1609 Shoal Creek Blvd Ste 203 <hr/> City Austin State TX Zip Code 78701-1022 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1195 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2476.40 <hr/> POSTAGE
B. Full Name (Last, First, Middle Initial) Patty Stewart Photography <hr/> Mailing Address 2025 Hicks St <hr/> City West Monroe State LA Zip Code 71291-7421 <hr/> Purpose of Disbursement Event Service Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00119.E1212 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 886.95 <hr/> EVENT SERVICE FEE
C. Full Name (Last, First, Middle Initial) Professional Data Services <hr/> Mailing Address 264 N Lumpkin St # 202 <hr/> City Athens State GA Zip Code 30601-2742 <hr/> Purpose of Disbursement Compliance Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1154 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 750.88 <hr/> COMPLIANCE CONSULTING

SUBTOTAL of Disbursements This Page (optional) ►

4114.23

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Postmaster Mailing Address 1925 E 70th St City Shreveport State LA Zip Code 71105-5303 Purpose of Disbursement PO Box Rental Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1177 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 44.00
			PO BOX RENTAL FEE
B.	Full Name (Last, First, Middle Initial) Daniel Robinson Mailing Address 10889 Dauphine Court City Shreveport State LA Zip Code 71106- Purpose of Disbursement Reimbursement for Travel Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1169 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period 402.99
			REIMBURSEMENT FOR TRAVEL EXPENSE
C.	Full Name (Last, First, Middle Initial) Shreveport Valet Mailing Address 404 N Evenside Ave City Henderson State TX Zip Code 75652-2718 Purpose of Disbursement Event Service Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91230.E1192 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 318.00
			EVENT SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)	764.99
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 49 / 61

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A. Full Name (Last, First, Middle Initial) Shreveport Valet</p> <p>Mailing Address 404 N Evenside Ave</p> <p>City Henderson State TX Zip Code 75652-2718</p> <p>Purpose of Disbursement Event Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1187</p> <p>Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>EVENT SERVICE FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Sir Speedy</p> <p>Mailing Address 1825 Avenue Of America</p> <p>City Monroe State LA Zip Code 71201-4529</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1144</p> <p>Date of Disbursement 10 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 323.44</p> <p>PRINTING</p>
<p>C. Full Name (Last, First, Middle Initial) Rita Spillers</p> <p>Mailing Address 2007 N 7th St Ste C</p> <p>City West Monroe State LA Zip Code 71291-4417</p> <p>Purpose of Disbursement Event Entertainment Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1191</p> <p>Date of Disbursement 12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 275.00</p> <p>EVENT ENTERTAINMENT FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

648.44

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Taylor Rental Center

Mailing Address PO Box 80029

City SHREVEPORT State LA Zip Code 71149-

Purpose of Disbursement
Equipment Rental Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91230.E1172

Date of Disbursement

12 / 01 / 2009

Amount of Each Disbursement this Period

260.09

EQUIPMENT RENTAL FEE

B.

Full Name (Last, First, Middle Initial)
Taylor Rental Center

Mailing Address PO Box 80029

City SHREVEPORT State LA Zip Code 71149-

Purpose of Disbursement
Equipment Rental Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 00107.E1203

Date of Disbursement

12 / 07 / 2009

Amount of Each Disbursement this Period

13.38

EQUIPMENT RENTAL FEE

C.

Full Name (Last, First, Middle Initial)
The Fletcher Group

Mailing Address 321 N 2nd St

City Monroe State LA Zip Code 71201-6725

Purpose of Disbursement
Direct Marketing

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 91230.E1153

Date of Disbursement

10 / 07 / 2009

Amount of Each Disbursement this Period

9195.62

DIRECT MARKETING

SUBTOTAL of Disbursements This Page (optional) ▶

9469.09

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
The Fletcher Group

Mailing Address 321 N 2nd St

City State Zip Code
Monroe LA 71201-6725

Purpose of Disbursement
Direct Marketing
Candidate Name

Category/
Type

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

Transaction ID: 00119.E1211
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	9

Amount of Each Disbursement this Period

9195.62

DIRECT MARKETING

B.

Full Name (Last, First, Middle Initial)
The Fletcher Group

Mailing Address 321 N 2nd St

City State Zip Code
Monroe LA 71201-6725

Purpose of Disbursement
Direct Marketing
Candidate Name

Category/
Type

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

Transaction ID: 91230.E1189
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	8	/	2	0	0	9

Amount of Each Disbursement this Period

9195.62

DIRECT MARKETING

C.

Full Name (Last, First, Middle Initial)
Thrifty Liquor

Mailing Address 3000 E. Texas Street

City State Zip Code
Bossier City LA 71112-

Purpose of Disbursement
Event Catering Expense
Candidate Name

Category/
Type

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

Transaction ID: 91230.E1174
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	0	9

Amount of Each Disbursement this Period

405.78

EVENT CATERING EXPENSE

SUBTOTAL of Disbursements This Page (optional) ▶

18797.02

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address 1500 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20220-0001</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 91230.E1145</p> <p>Date of Disbursement 10 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 76.50</p> <p>Category/Type PAYROLL TAXES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address 1500 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20220-0001</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00119.E1215</p> <p>Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 4.00</p> <p>Category/Type PAYROLL TAXES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) United States Treasury</p> <p>Mailing Address 1500 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20220-0001</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00119.E1214</p> <p>Date of Disbursement 11 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 76.50</p> <p>Category/Type PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

157.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 91230.E1198 Date of Disbursement 12 / 29 / 2009
	Mailing Address 1500 Pennsylvania Ave	Amount of Each Disbursement this Period 76.50
	City Washington State DC Zip Code 20220-0001	
	Purpose of Disbursement Payroll Taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 00107.E1200 Date of Disbursement 12 / 31 / 2009
	Mailing Address 1500 Pennsylvania Ave	Amount of Each Disbursement this Period 76.50
	City Washington State DC Zip Code 20220-0001	
	Purpose of Disbursement Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: 91230.E1178 Date of Disbursement 12 / 16 / 2009
	Mailing Address PO Box 4001	Amount of Each Disbursement this Period 313.71
	City Acworth State GA Zip Code 30101-9002	
	Purpose of Disbursement Phones Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONES

SUBTOTAL of Disbursements This Page (optional)	466.71
TOTAL This Period (last page this line number only)	87484.74

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Fleming For Congress

A.	Full Name (Last, First, Middle Initial) Henry Burns Campaign Mailing Address 129 Lone Oak St City Benton State LA Zip Code 71006-3928 Purpose of Disbursement CONTRIBUTION TO LOCAL CANDIDATE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91230.E1181 Date of Disbursement 12 / 10 / 2009 Amount of Each Disbursement this Period 250.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Chester T. Kelley for Congress Mailing Address 4022 Greenwood Rd City Shreveport State LA Zip Code 71109-6411 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91230.E1179 Date of Disbursement 12 / 10 / 2009 Amount of Each Disbursement this Period 2000.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Louisiana Values PAC Mailing Address PO Box 325 City Minden State LA Zip Code 71058-0325 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 91230.E1180 Date of Disbursement 12 / 09 / 2009 Amount of Each Disbursement this Period 2000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

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

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

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

FOR LINE NUMBER: (check only one)

<input 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 checked="" 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)
Fleming For Congress

A.

Full Name (Last, First, Middle Initial)
Louisiana Values PAC

Transaction ID: 91230.E1152
Date of Disbursement

Mailing Address PO Box 325

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	9

City Minden State LA Zip Code 71058-0325

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
CONTRIBUTION

--

Category/
Type

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)
National Republican Congressional Comm

Transaction ID: 91230.E1147
Date of Disbursement

Mailing Address 320 1st St SE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	9

City Washington State DC Zip Code 20003-1838

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
CONTRIBUTION

--

Category/
Type

Candidate Name

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

State: District:

Contribution

SUBTOTAL of Disbursements This Page (optional) ►

10150.00

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

14400.00

SCHEDULE C (FEC Form 3)

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

PAGE 56 / 61

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

LOANS

NAME OF COMMITTEE (In Full)
Fleming For Congress

Transaction ID: LS80925.C455

LOAN SOURCE Full Name (Last, First, Middle Initial)
John Fleming - [PERSONAL FUNDS]

Mailing Address PO Box 1236

City Minden State LA ZIP Code 71058-1236

Election:
 Primary
 General
 Other (specify) ▼
 Primary 2008

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
649980.00	399980.00	250000.00

TERMS

Date Incurred MM DD YY YY 01 25 2008	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="250000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>

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

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 57 / 61
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

LOANS

NAME OF COMMITTEE (In Full)
Fleming For Congress

Transaction ID: LS81028.C568

LOAN SOURCE Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary Runoff 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
275000.00	25000.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 10 D D 08 Y Y Y Y 2008	ONDEMAND	.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional)	25000.00
TOTALS This Period (last page in this line only)	[]

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

SCHEDULE C (FEC Form 3)

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

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

LOANS

NAME OF COMMITTEE (In Full)
Fleming For Congress

Transaction ID: LS81203.C1125

LOAN SOURCE Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan 75500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 75500.00
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TERMS

Date Incurred MM DD YYYY 11 07 2008	Date Due ONDEMAND	Interest Rate .0000 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="75500.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

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

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

LOANS

NAME OF COMMITTEE (In Full)
Fleming For Congress

Transaction ID: LS90102.C1201

LOAN SOURCE Full Name (Last, First, Middle Initial) John Fleming - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount 2008
Mailing Address PO Box 1236	
City Minden State LA ZIP Code 71058-1236	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2	D D 1 1	Y Y Y Y 2 0 0 8	ONDEMAND
		.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="100.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="575600.00"/>

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Fleming For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Fletcher Group	Nature of Debt (Purpose): Direct Marketing
Mailing Address 321 N 2nd St	
City State ZIP Code Monroe LA 71201-6725	

Outstanding Balance Beginning This Period 75978.49	Transaction ID: LS00119.E1211	
Amount Incurred This Period 0.00	Payment This Period 27586.86	Outstanding Balance at Close of This Period 48391.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reel 2 Reel Productions	Nature of Debt (Purpose): Commercial Production
Mailing Address 321 N 2nd St	
City State ZIP Code Monroe LA 71201-6725	

Outstanding Balance Beginning This Period 62544.50	Transaction ID: LS90105.E864	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 62544.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fletcher Media	Nature of Debt (Purpose): Media Buy
Mailing Address 321 N 2nd St	
City State ZIP Code Monroe LA 71201-6725	

Outstanding Balance Beginning This Period 616.00	Transaction ID: LS90105.E859	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 616.00

1) SUBTOTALS This Period This Page (optional).....	111552.13
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 61 / 61
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Fleming For Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Roy Fletcher			Nature of Debt (Purpose): Political Consulting
Mailing Address 220 Delgado Dr			
City Baton Rouge	State LA	ZIP Code 70808-4721	

Outstanding Balance Beginning This Period		Transaction ID: LS90105.E865	
8000.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	8000.00	

1) SUBTOTALS This Period This Page (optional).....	8000.00
2) TOTALS This Period (last page this line number only).....	119552.13
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	575600.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	695152.13