

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Charles Boustany JR MD for Congress, INC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	82204.51	1484076.08
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	489.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	82204.51	1483587.08
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	268351.90	932079.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	600.00	86395.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	267751.90	845684.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	500350.27	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 02/2003)

Write or Type Committee Name
Charles Boustany JR MD for Congress, INC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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).....

64600.00

688223.00

(ii) Unitemized.....

930.00

36761.30

(iii) TOTAL of contributions

65530.00

724984.30

from individuals..... ▶

0.00

161.08

(b) Political Party Committees.....

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

16674.51

758930.70

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

82204.51

1484076.08

(add Lines 11(a)(iii), (b), (c), and (d))

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

0.00

25983.74

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

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

600.00

86395.41

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

1027.17

12896.16

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

83831.68

1609351.39

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	268351.90	932079.90
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	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	239.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	489.00
21. OTHER DISBURSEMENTS.....	116100.00	296810.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	384451.90	1229378.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	800970.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	83831.68
25. SUBTOTAL (add Line 23 and Line 24).....	884802.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	384451.90
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	500350.27

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Glenn Ally

Mailing Address 155 Hospital Drive

City State Zip Code
Lafayette LA 70503-2852

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

Name of Employer Occupation
The Psychology Group Psychologist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4552

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nancy Broussard

Mailing Address 604 Woodvale Avenue

City State Zip Code
Lafayette LA 70503-3537

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

Name of Employer Occupation
Van Eaton and Romero Realtor

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4545

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dean Cole

Mailing Address PO Box 52688

City State Zip Code
Lafayette LA 70505-2688

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

Name of Employer Occupation
Knight Oil Tools Vice President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4544

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Rose Fontana		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 314 Chastant Boulevard		Transaction ID: A-C4553
City State Zip Code Lafayette LA 70508-5210	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer The Center for Work Rehabilitation	Occupation Occupational Therapist	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Chad Galicia		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 943 Chapel Lane		Transaction ID: A-C4546
City State Zip Code Lake Charles LA 70611-6835	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed	Occupation Mobile Home Rentals	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1560.00	

Full Name (Last, First, Middle Initial) C. George Guidry		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6
Mailing Address 111 Waterside Drive		Transaction ID: A-C4548
City State Zip Code Lafayette LA 70503-8408	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Dwight Andrus Insurance, Inc	Occupation Insurance Salesman	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Elizabeth A. Kergan

Mailing Address 300 Old Settlement Road

City State Zip Code
Lafayette LA 70508-7040

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

Name of Employer Occupation
Sonic Restaurants Co-Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4550

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
J.Lee Leonard, MD.

Mailing Address 1448 S College Road

City State Zip Code
Lafayette LA 70503-2920

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4549

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jeryl Mohn

Mailing Address 6 Lawton Circle

City State Zip Code
Sugar Land TX 77479-5653

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

Name of Employer Occupation
Panhandle Energy Senior Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 6

Transaction ID: A-C4543

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Kathryn Scurlock		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 229 Ridgewood Drive		Transaction ID: A-C4547	
City State Zip Code Metairie LA 70005-3931	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Saks Fifth Avenue	Occupation Saleswoman		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Charles Trent		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 6	
Mailing Address 212 River Ranch Boulevard		Transaction ID: A-C4551	
City State Zip Code Lafayette LA 70508-6626	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Landry, Harris, & Co.	Occupation Insurance Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Edward C Abell, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 19 Kimball Lane		Transaction ID: A-C4485	
City State Zip Code Lafayette LA 70508	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Onebane Law Firm	Occupation Attorney		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Marcelle F Citron Mailing Address 108 Lockeport Circle City State Zip Code Lafayette LA 70508-6462 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4449 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	2		2	0	0	6														
250.00																							
Name of Employer Occupation Hub City Ford Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																				
500.00																							

B. Full Name (Last, First, Middle Initial) Phillip Perret Mailing Address 301 Woodbluff Drive City State Zip Code Lafayette LA 70503-4449 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4560 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	3		2	0	0	6														
250.00																							
Name of Employer Occupation Our Lady of Lourdes Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

C. Full Name (Last, First, Middle Initial) Jay Culotta Mailing Address 1101 S College Road Suite 304 City State Zip Code Lafayette LA 70503-3038 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4571 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	6														
250.00																							
Name of Employer Occupation Self-Employed Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Gary Hightower

Mailing Address 2507 Vogue Drive

City State Zip Code
Lake Charles LA 70605-5163

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

Name of Employer Occupation
Cameron Communications Vice President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: A-C4570

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jennifer Lipschulz

Mailing Address 9 W 57th Street Suite 4200

City State Zip Code
New York NY 10019-2701

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: A-C4572

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pecot & Company Architects, LLP

Mailing Address 300 Rue Beauregard Bldg. D

City State Zip Code
Lafayette LA 70508-8511

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: A-C5774

Amount of Each Receipt this Period
250.00

See Memo Items

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Fernando Alemany		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 138 Lazaro Boulevard Suite A		Transaction ID: A-C4493
City Opelousas State LA Zip Code 70570-9126	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed Occupation Physician	Election Cycle-to-Date 1500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Bennett B Anderson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address PO Box 3524		Transaction ID: A-C4498
City Lafayette State LA Zip Code 70502-3524	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Anderson Law Office Occupation Attorney	Election Cycle-to-Date 1500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Alta Baker		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address PO Box 751		Transaction ID: A-C4508
City Jennings State LA Zip Code 70546-0751	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Safe Haven Enterprises Occupation President	Election Cycle-to-Date 2600.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Kim Broussard

Mailing Address 316 Camberly Circle

City State Zip Code
Lafayette LA 70508-5526

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

Name of Employer Self-Employed
Occupation
Gastroenterologist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

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

Transaction ID: A-C4488

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 110 Girard Woods Road

City State Zip Code
Lafayette LA 70503-2810

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

Name of Employer Butcher Distributors
Occupation
President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

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

Transaction ID: A-C4489

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David Buttross, Jr

Mailing Address 827 Theriot Road

City State Zip Code
Lake Charles LA 70611-6115

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

Name of Employer Self-Employed
Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

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

Transaction ID: A-C4503

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Daryl G Byrd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 100 Whitcomb Circle		Transaction ID: A-C4458	
City State Zip Code Lafayette LA 70503-3648	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Iberia Bank President	Election Cycle-to-Date 2500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Sandi Chalmers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 138 Rue Massie		Transaction ID: A-C4465	
City State Zip Code Broussard LA 70518-7525	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Home Bank Chief Financial Officer	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Bradley Chastant		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 913 S College Road Suite 101		Transaction ID: A-C4455	
City State Zip Code Lafayette LA 70503-3061	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Self-Employed Physician	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Monique T Clark

Mailing Address 101 Greenhill Circle

City State Zip Code
Broussard LA 70518-7512

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

Name of Employer Self-Employed Occupation
Self-Employed Construction

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: A-C4491

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John E Cobb

Mailing Address 121 Coolidge Street, Suite 100

City State Zip Code
Lafayette LA 70506

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

Name of Employer Self-Employed Occupation
Self-Employed Orthopedic Surgeon

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: A-C4481

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Walter B Comeaux, Jr.

Mailing Address 327 Beverly Drive

City State Zip Code
Lafayette LA 70503-3109

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

Name of Employer Retired Occupation
Retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: A-C4490

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Alex P Crochet, Jr.

Mailing Address PO Box 396

City State Zip Code
Abbeville LA 70511-0396

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

Name of Employer Occupation
Marshall & Edwards Insurance Agency Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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

Transaction ID: A-C4540

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas D. Curtis

Mailing Address 208 Woodbluff Drive

City State Zip Code
Lafayette LA 70503-4448

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

Name of Employer Occupation
Retired Retired

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

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

Transaction ID: A-C4451

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert W Daigle

Mailing Address 410 Worth Avenue

City State Zip Code
Lafayette LA 70508-6637

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

Name of Employer Occupation
River Ranch Development Co. Developer

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

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

Transaction ID: A-C4499

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. J.H. Dumesnil		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 600 Colonial Drive		Transaction ID: A-C4452	
City State Zip Code Lafayette LA 70506-3106	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer First National Bank	Occupation Vice Chairman		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. John R Enright		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 4080 Locke Lane		Transaction ID: A-C4463	
City State Zip Code Lake Charles LA 70605-2258	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Urology Center of Southwe- st Louisiana	Occupation Physician		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Tom Flanagan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 111 Williamsburg Street		Transaction ID: A-C4467	
City State Zip Code Lake Charles LA 70605-5719	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Dan Flavin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 1916 Wilmax Street		Transaction ID: A-C4512	
City State Zip Code Lake Charles LA 70605-5216		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Flavin Realty Realtor			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Tim Flavin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 2704 Nottoway Lane		Transaction ID: A-C4483	
City State Zip Code Lake Charles LA 70605-4015		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Flavin Realty Realtor			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Reed A Fontenot, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 4743 Prien Bluff Road		Transaction ID: A-C4536	
City State Zip Code Lake Charles LA 70605-7719		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self Employed Physician			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Stan Foster, MD

Mailing Address 108 Valencia Drive

City State Zip Code
Lafayette LA 70506-3843

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

Name of Employer Self-Employed
Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: A-C4568

Amount of Each Receipt this Period
2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 108 Valencia Drive

City State Zip Code
Lafayette LA 70506-3843

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

Name of Employer Self-Employed
Occupation
Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼
Runoff

Election Cycle-to-Date ▼
2500.00

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

Transaction ID: A-C4569

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
P. A Fruge

Mailing Address 204 Leicester Lane

City State Zip Code
Lafayette LA 70508-4863

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

Name of Employer LA Capital Development
Occupation
President/CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: A-C4533

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Christian J Gambel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address PO Box 51105		Transaction ID: A-C4484	
City Lafayette	State LA	Zip Code 70505-1105	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Northwestern Mutual	Occupation Agent	Election Cycle-to-Date 2000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. W. G Gaudet		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 301 Laurence Avenue		Transaction ID: A-C4480	
City Lafayette	State LA	Zip Code 70503-3123	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Voorhies & Labbe	Occupation Attorney	Election Cycle-to-Date 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. W. J (Tony) Gordon, III		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 437 Girard Park Drive		Transaction ID: A-C4462	
City Lafayette	State LA	Zip Code 70503-2401	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Franciscan Ministries	Occupation Vice President	Election Cycle-to-Date 375.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Anna R Gray		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 21 River Lane		Transaction ID: A-C4504
City Lake Charles	State LA	Zip Code 70605-7711
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer The Gray Law Firm	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dwayne P Hargroder		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 105 N Main Street Suite 200		Transaction ID: A-C4531
City Opelousas	State LA	Zip Code 70570-6254
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Hargroder Companies	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Gary J Haynes		Date of Receipt MM / DD / YYYY 10 / 16 / 2006
Mailing Address 1013 W University Avenue		Transaction ID: A-C4506
City Lafayette	State LA	Zip Code 70506-3460
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Brenda G Headley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 204 Mill Valley Run		Transaction ID: A-C4454	
City State Zip Code Lafayette LA 70508-7052		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Ampol Occupation Owner			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Thomas Henning		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address PO Box 424		Transaction ID: A-C4461	
City State Zip Code Lake Charles LA 70602-0424		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Cameron Communications Occupation Attorney			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. W. L Henning		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 101 E Thomas Street		Transaction ID: A-C4468	
City State Zip Code Sulphur LA 70663-3347		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Cameron Communications, LLC Occupation Management			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Richard Hensarling

Mailing Address 320 Princeton Woods Loop

City State Zip Code
Lafayette LA 70508-6602

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

Name of Employer Self-Employed Occupation
Geologist

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: A-C4522

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
C. Paul Hilliard

Mailing Address PO Box 52745

City State Zip Code
Lafayette LA 70505-2745

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

Name of Employer Badger Oil Corp. Occupation
President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Runoff

4000.00

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

Transaction ID: A-C4542

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
C. Paul Hilliard

Mailing Address PO Box 52745

City State Zip Code
Lafayette LA 70505-2745

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

Name of Employer Badger Oil Corp. Occupation
President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4000.00

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

Transaction ID: A-C4565

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 67
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Harry T Howard, III Mailing Address 521 Iona Street City State Zip Code Metairie LA 70005-4429 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4501 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
250.00																							
Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

B. Full Name (Last, First, Middle Initial) James C Ingram, Jr Mailing Address 153 Shannon Road City State Zip Code Lafayette LA 70503-3510 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4492 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
500.00																							
Name of Employer Vein Clinic of Louisiana Occupation Surgeon Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																				
500.00																							

C. Full Name (Last, First, Middle Initial) Lionel L. Joussaye Mailing Address 2010 Oak Park Boulevard City State Zip Code Lake Charles LA 70601-7828 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4535 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
250.00																							
Name of Employer Self-Employed Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Paulette B King Mailing Address 111 Devin Lane City <u>Lafayette</u> State <u>LA</u> Zip Code <u>70508-6857</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4470 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
500.00																							
Name of Employer: Rig Tools Inc. Occupation: Owner Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																					
500.00																							

B. Full Name (Last, First, Middle Initial) Jean T Kreamer Mailing Address 1121 Marilyn Drive City <u>Lafayette</u> State <u>LA</u> Zip Code <u>70503-4133</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4505 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
100.00																							
Name of Employer: Self Employed Occupation: Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																					
500.00																							

C. Full Name (Last, First, Middle Initial) Clayton LaFosse Mailing Address 209 Larchwood Drive City <u>Lafayette</u> State <u>LA</u> Zip Code <u>70503-5019</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4516 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
500.00																							
Name of Employer: LaFosse Construction Occupation: Project Manager Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																					
500.00																							

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Ellen Lancon Mailing Address 3615 Colette Drive City Sulphur State LA Zip Code 70663-3936 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C4460 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Lancon Engineers, Inc. Occupation Bookkeeper/Office Manager Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1370.00		

B. Full Name (Last, First, Middle Initial) A. J. Lanie Mailing Address PO Box 169 City Youngsville State LA Zip Code 70592-0169 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C4532 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Youngs Industries, Inc. Occupation Property Manager Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Bonnie Lee Mailing Address 4102 Woodside Drive City Lake Charles State LA Zip Code 70605-4034 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C4559 Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer GlaxoSmithKline Occupation Pharmaceutical Sales Receipt For: 2006 Election Cycle-to-Date <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	▶	1900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Jon D Leleux		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 225 Farmington Drive		Transaction ID: A-C4515	
City State Zip Code Lafayette LA 70503-8410	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Self Employed Occupation Physician	Election Cycle-to-Date 3000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Ricardo R Leoni, II		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 102 Quinlan Drive		Transaction ID: A-C4527	
City State Zip Code Lafayette LA 70508-7481	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Azar Eye Clinic Occupation Ophthalmologist	Election Cycle-to-Date 4000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Maria Leonpacher		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 412 Huntley Avenue		Transaction ID: A-C4557	
City State Zip Code Lafayette LA 70508-4046	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Marlin Energy Occupation Engineer	Election Cycle-to-Date 250.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Rob McCorquodale Mailing Address PO Box 3126 City State Zip Code Lake Charles LA 70602-3126 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4511 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
250.00																							
Name of Employer Occupation Calcaseiu Sherriff's Office Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																				
500.00																							

B. Full Name (Last, First, Middle Initial) J. L McGough Mailing Address 2225 23rd Street City State Zip Code Lake Charles LA 70601-7950 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4479 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
500.00																							
Name of Employer Occupation Retired Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>1375.00</td> </tr> </table>	1375.00																				
1375.00																							

C. Full Name (Last, First, Middle Initial) Flo Meadows Mailing Address 311 Champs Elysee Boulevard City State Zip Code Lafayette LA 70503-6509 FEC ID number of contributing federal political committee. C		Date of Receipt <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>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A-C4459 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
250.00																							
Name of Employer Occupation Coldwell Banker Real Estate Realtor & CPA Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Richard M Miers

Mailing Address 205 Remington Drive

City State Zip Code
Lafayette LA 70503-5481

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: A-C4474

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
E. M Miller

Mailing Address 3219 Henderson Bayou Road

City State Zip Code
Lake Charles LA 70605-2245

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

Name of Employer Retired Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: A-C4466

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charlie Moncla, Jr.

Mailing Address PO Box 53748

City State Zip Code
Lafayette LA 70505-3748

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

Name of Employer Moncla Well Services, Inc. Occupation Owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

Transaction ID: A-C4469

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Janice Mosing		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 131 Wembley Road		Transaction ID: A-C4523	
City State Zip Code Lafayette LA 70503-3568	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Curtis Moss		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 158 W Bayou Parkway		Transaction ID: A-C4556	
City State Zip Code Lafayette LA 70503-3302	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Moss Motors Occupation Auto Dealer	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Marvin A Munchrath		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address PO Box 52121		Transaction ID: A-C4496	
City State Zip Code Lafayette LA 70505-2121	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Self-Employed Occupation Geologist	Election Cycle-to-Date 500.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial) Fred W Nodier		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 1916 Wilmax Street		Transaction ID: A-C4513
City State Zip Code Lake Charles LA 70605-5216		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Kenneth Odinet		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 501 W Saint Mary Boulevard Suite 514		Transaction ID: A-C4518
City State Zip Code Lafayette LA 70506-4699		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self Employed	Occupation Physician	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

C. Full Name (Last, First, Middle Initial) Laurie C Ortego		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 103 Waterside Drive		Transaction ID: A-C4487
City State Zip Code Lafayette LA 70503-8408		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Kirby Pecot

Mailing Address 300 Rue Beaugard Bldg. D

City State Zip Code
Lafayette LA 70508-8511

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

Name of Employer Occupation
Pecot & Company Architect Architect

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

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

Transaction ID: A-PI3

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Partnership Itemization Memo

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

Mailing Address 1634 Ryan Street

City State Zip Code
Lake Charles LA 70601-5949

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

Name of Employer Occupation
Perry Agency, Inc. Insurance Agency

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

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

Transaction ID: A-C4529

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
J. M Poole, Sr.

Mailing Address PO Box 54048

City State Zip Code
Lafayette LA 70505-4048

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

Name of Employer Occupation
Sunbelt Energy Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00

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

Transaction ID: A-C4478

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Frank O Pruitt		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 3218 Henderson Bayou Road		Transaction ID: A-C4472	
City State Zip Code Lake Charles LA 70605-2236	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation PWK Timberland Inc. Executive	Election Cycle-to-Date 1000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Sam Y Pruitt		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 1401 Ryan Street		Transaction ID: A-C4473	
City State Zip Code Lake Charles LA 70601-5918	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation PWK Timberland Corp. Land & Timber Management	Election Cycle-to-Date 250.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Glenn Pumpelly		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 1521 Ford Street		Transaction ID: A-C4509	
City State Zip Code Lake Charles LA 70601-5356	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Pumpelly Oil Company, LLC Chief Executive Officer	Election Cycle-to-Date 2000.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Joan M Richard		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 129 Shannon Road		Transaction ID: A-C4482
City State Zip Code Lafayette LA 70503-3510	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Earl Romero		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 104 Van Dyke Court		Transaction ID: A-C4456
City State Zip Code Lafayette LA 70503-6022	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Gail Romero		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 119 Karolwood Drive		Transaction ID: A-C4497
City State Zip Code Lafayette LA 70503-3504	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. William W Rucks, IV		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address PO Box 51967		Transaction ID: A-C4476	
City Lafayette	State LA	Zip Code 70505-1967	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Self Employed	Occupation Investor	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) B. Rodney L. Savoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 100 Camellia Boulevard		Transaction ID: A-C4566	
City Lafayette	State LA	Zip Code 70503-4202	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer River Ranch Development Co.	Occupation Developer	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2500.00			

Full Name (Last, First, Middle Initial) C. Rodney L. Savoy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 100 Camellia Boulevard		Transaction ID: A-C4567	
City Lafayette	State LA	Zip Code 70503-4202	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer River Ranch Development Co.	Occupation Developer	Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	
Election Cycle-to-Date ▼ 2500.00			

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. M. B. Stolzenhaler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 201 Rue De Jean Suite 200		Transaction ID: A-C4453
City State Zip Code Lafayette LA 70508-8510	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Amellas Pizza Company Owner		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. J. D. Strother		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 108 Ducharme Court		Transaction ID: A-C4457
City State Zip Code Lafayette LA 70503-3563	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Health Care Group Financial		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Lawrence F Svendsen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 202 Whitcomb Road		Transaction ID: A-C4494
City State Zip Code Lafayette LA 70503-3626	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Key Energy Solutions Petroleum Engineer		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Rebecca D Thaw		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 130 Emily Circle		Transaction ID: A-C4495	
City State Zip Code Lafayette LA 70508-6754		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Homemaker Homemaker			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Carla Turner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 2406 Johns Alley		Transaction ID: A-C4514	
City State Zip Code Lake Charles LA 70605-4026		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Homemaker Homemaker			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. John S. Vanhoose, MD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 830 W Bayou Pines Drive		Transaction ID: A-C4563	
City State Zip Code Lake Charles LA 70601-7077		Amount of Each Receipt this Period 1950.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self Employed Physician			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4250.00	

SUBTOTAL of Receipts This Page (optional) ▶	2700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
John S. Vanhoose, MD

Mailing Address 830 W Bayou Pines Drive

City State Zip Code
Lake Charles LA 70601-7077

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

Name of Employer Self Employed
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date 4250.00

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

Transaction ID: A-C4564

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David R Wallace

Mailing Address 3137 Saint Andrews Drive

City State Zip Code
Lake Charles LA 70605-5940

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

Name of Employer Children's Clinic of SW LA
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

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

Transaction ID: A-C4464

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James D Welsh

Mailing Address 2981 Ellington Drive

City State Zip Code
Rock Hill SC 29732-9486

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

Name of Employer Carolina Blood and Cancer Associates
Occupation Physician

Receipt For: 2006
 Primary General
 Other (specify)

Election Cycle-to-Date 700.00

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

Transaction ID: A-C4517

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Jack Wheeler

Mailing Address PO Box 4886

City State Zip Code
Lake Charles LA 70606-4886

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

Name of Employer Occupation
Fraser, Morris, Wheeler, LLP Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

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

Transaction ID: A-C4558

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Marvin C Wingate

Mailing Address 1400 Abbeville Highway

City State Zip Code
Rayne LA 70578-5506

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

Name of Employer Occupation
Wingate's House Moving Owner

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

750.00

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

Transaction ID: A-C4534

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Charles H Wyatt

Mailing Address 429 Farmington Drive

City State Zip Code
Lafayette LA 70503-8412

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

Name of Employer Occupation
CIS Heart Surgeon

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

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

Transaction ID: A-C4521

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 67
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Elaine Zuschlag		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 108 Astoria Loop		Transaction ID: A-C4562	
City State Zip Code Lafayette LA 70508-7302		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Homemaker Homemaker			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) B. Richard E Zuschlag		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 108 Astoria Loop		Transaction ID: A-C4561	
City State Zip Code Lafayette LA 70508-7302		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Acadian Ambulance Service Chairman and CEO			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) C. Dan L Donald, Jr.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address PO Box 675		Transaction ID: A-C4538	
City State Zip Code Jennings LA 70546-0675		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Jeff Davis Bank & Trust Banker			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 67
	(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)
Charles Boustany JR MD for Congress, INC

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

Mailing Address 15727 Lake Loop Drive

City State Zip Code
Cypress TX 77433-5725

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

Name of Employer Occupation
Panhandle Energy Manager

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: A-C4450

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Imae C. Seilhan

Mailing Address 1424 N Avenue A

City State Zip Code
Crowley LA 70526-2732

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: A-C4537

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	64600.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 67
	<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)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Southern Union PAC

Mailing Address 417 Lackawanna Avenue

City State Zip Code
Scranton PA 18503-2013

FEC ID number of contributing federal political committee. **C** C00385831

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3924.51

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

Transaction ID: A-I8529

Amount of Each Receipt this Period
1924.51

Inkind: Catering

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Gas Association PAC

Mailing Address 400 N Capitol Street NW

City State Zip Code
Washington DC 20001-1511

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: A-C5765

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
ChevronTexaco Employees PAC

Mailing Address PO Box 6016

City State Zip Code
San Ramon CA 94583-0716

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: A-C5762

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	3924.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 67
	<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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Interstate Natural Gas Assoc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 10 G Street NE Suite 700		Transaction ID: A-C5763
City Washington State DC Zip Code 20002-4248	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00116145		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Land O'Lakes Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address PO Box 64101		Transaction ID: A-C5764
City Saint Paul State MN Zip Code 55164-0101	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00009423		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. SOCIETY FOR VASCULAR SURGERY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 633 N Saint Clair Street Floor 24		Transaction ID: A-C5769
City Chicago State IL Zip Code 60611-6554	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00381459		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 67
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Acadian Ambulance Employee Federal PAC

Mailing Address PO Box 98000

City State Zip Code
Lafayette LA 70509-8000

FEC ID number of contributing federal political committee. **C** C00335570

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID: A-C5773

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Centerpoint Energy Inc. PAC

Mailing Address PO Box 4567

City State Zip Code
Houston TX 77210-4567

FEC ID number of contributing federal political committee. **C** C00333534

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

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

Transaction ID: A-C5770

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 1725 Jefferson Davis Highway

City State Zip Code
Arlington VA 22202-4102

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: A-C5779

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 67
	<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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Louisiana River Pilots Assn Mailing Address 104 Abadie Lane City State Zip Code Covington LA 70433-2957 FEC ID number of contributing federal political committee. C C00413252 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C5776 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
---	--	---

Full Name (Last, First, Middle Initial) B. Louisiana Sheriffs and Deputies PAC Mailing Address 1175 Nicholson Drive City State Zip Code Baton Rouge LA 70802-7535 FEC ID number of contributing federal political committee. C C00357905 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C5771 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
--	--	---

Full Name (Last, First, Middle Initial) C. Marathon Oil Co. Employees PAC Mailing Address 539 S Main Street City State Zip Code Findlay OH 45840-3229 FEC ID number of contributing federal political committee. C C00040568 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 Transaction ID: A-C5772 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
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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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 67
	<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)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
PPG Better Government Team

Mailing Address One PPG Place, 7 West

City State Zip Code
Pittsburgh PA 15272

FEC ID number of contributing federal political committee. **C** C00034298

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

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

Transaction ID: A-C5775

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cole for Congress

Mailing Address PO Box 722256

City State Zip Code
Norman OK 73070-8705

FEC ID number of contributing federal political committee. **C** C00379735

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: A-C5780

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Shell Employees PAC

Mailing Address PO Box 2463

City State Zip Code
Houston TX 77252-2463

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: A-C5781

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 67
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
The Williams Companies, Inc PAC

Mailing Address 1627 I Street NW
Suite 900

City Washington State DC Zip Code 20006-4057

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	8	/	2	0	0	6

Transaction ID: A-C5777

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	16674.51

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 67
	<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	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

A. Full Name (Last, First, Middle Initial)
Friends of Mike Ferguson

Mailing Address 16 Mount Bethel Road
Suite 353

City Warren State NJ Zip Code 07059-5604

FEC ID number of contributing federal political committee. **C** C00366195

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

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

Transaction ID: A-O5768

Amount of Each Receipt this Period
100.00

Refunded Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pryce for Congress

Mailing Address 145 E Rich Street

City Columbus State OH Zip Code 43215-5240

FEC ID number of contributing federal political committee. **C** C00265850

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

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

Transaction ID: A-O5789

Amount of Each Receipt this Period
100.00

Refund Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Johnson for Congress Committee

Mailing Address PO Box 1986

City New Britain State CT Zip Code 06050-1986

FEC ID number of contributing federal political committee. **C** C00145607

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

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

Transaction ID: A-O5766

Amount of Each Receipt this Period
100.00

Refunded Contribution
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 67
	<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	

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Jon Porter for Congress		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 900 S Pavilion Center Drive # 300		Transaction ID: A-O5778	
City State Zip Code Las Vegas NV 89144-4581	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C C00367367	Refunded Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 100.00			

Full Name (Last, First, Middle Initial) B. Thelma Drake for Congress		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address PO Box 61480		Transaction ID: A-O5767	
City State Zip Code Virginia Beach VA 23466-1480	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C C00405696	Refunded Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 350.00			

Full Name (Last, First, Middle Initial) C. Friends of Don Sherwood		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 81 Warren Street		Transaction ID: A-O5782	
City State Zip Code Tunkhannock PA 18657-1507	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C C00343558	Refunded Contribution <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 100.00			

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 67

(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

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NAME OF COMMITTEE (In Full)

Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial)

A. Iberia Bank

Mailing Address 200 W Congress Street

City	State	Zip Code
Lafayette	LA	70501-6873

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

Name of Employer Occupation

Receipt For: 2006	Election Cycle-to-Date ▼
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	12896.16
<input type="checkbox"/> Other (specify) ▼	

Date of Receipt

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

Transaction ID: A-M5791

Amount of Each Receipt this Period
1027.17

Interest

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1027.17

TOTAL This Period (last page this line number only)

1027.17

**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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Dawson McCarthy Nelson Media		Transaction ID: B-E-8388 Date of Disbursement 10 / 01 / 2006	
Mailing Address 102 33rd St., NW		Amount of Each Disbursement this Period 11000.00	
City Washington State DC Zip Code 20007	Purpose of Disbursement Media Consulting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Strategic Media Service		Transaction ID: B-E-8389 Date of Disbursement 10 / 01 / 2006	
Mailing Address 1023 31st Street NW		Amount of Each Disbursement this Period 18520.44	
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8284 Date of Disbursement 10 / 03 / 2006	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Service Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	29535.44
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Lafayette Utilities System		Transaction ID: B-E-8290 Date of Disbursement 10 / 03 / 2006	
Mailing Address PO Box 4024		Amount of Each Disbursement this Period 203.63	
City Lafayette State LA Zip Code 70502-4024	Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 001			

Full Name (Last, First, Middle Initial) B. Public Opinion Strategies		Transaction ID: B-E-8342 Date of Disbursement 10 / 03 / 2006	
Mailing Address 277 S Washington Street Suite 320		Amount of Each Disbursement this Period 13000.00	
City Alexandria State VA Zip Code 22314-3674	Purpose of Disbursement Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 001			

Full Name (Last, First, Middle Initial) C. Thibodaux, Hebert, Deshotels & LeBlanc		Transaction ID: B-E-8330 Date of Disbursement 10 / 03 / 2006	
Mailing Address PO Box 53147		Amount of Each Disbursement this Period 684.00	
City Lafayette State LA Zip Code 70505-3147	Purpose of Disbursement Bookkeeping Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 001			

SUBTOTAL of Disbursements This Page (optional)	13887.63
TOTAL This Period (last page this line number only)	(Empty)

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Iberia Bank		Transaction ID: B-E-8285 Date of Disbursement 10 / 04 / 2006	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Service Fee Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Iberia Bank		Transaction ID: B-E-8286 Date of Disbursement 10 / 05 / 2006	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Service Fee Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Strategic Media Service		Transaction ID: B-E-8282 Date of Disbursement 10 / 05 / 2006	
Mailing Address 1023 31st Street NW		Amount of Each Disbursement this Period 53881.14	
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy Candidate Name	001 Category/ Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	53911.14
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Southern Union PAC		Transaction ID: B-I-8529 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 417 Lackawanna Avenue		Amount of Each Disbursement this Period 1924.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Scranton State PA Zip Code 18503-2013	Purpose of Disbursement Inkind: Catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Strategic Media Service		Transaction ID: B-E-8276 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 1023 31st Street NW		Amount of Each Disbursement this Period 60825.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. UpGrade Films		Transaction ID: B-E-8382 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 1023 31st Street NW Floor 4		Amount of Each Disbursement this Period 9554.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	72303.81
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. UpGrade Films		Transaction ID: B-E-8383 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 1023 31st Street NW Floor 4		Amount of Each Disbursement this Period 9500.00
City Washington State DC Zip Code 20007-4458	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Media Buy Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. UpGrade Films		Transaction ID: B-E-8384 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 1023 31st Street NW Floor 4		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20007-4458	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Media Buy Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8287 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00
City Lafayette State LA Zip Code 70501-6873	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Service Fee Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12015.00
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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Iberia Bank		Transaction ID: B-E-8288 Date of Disbursement 10 / 11 / 2006
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Service Fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Strategic Media Service		Transaction ID: B-E-8390 Date of Disbursement 10 / 11 / 2006
Mailing Address 1023 31st Street NW		Amount of Each Disbursement this Period 62951.90
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Upgrade Films		Transaction ID: B-E-8283 Date of Disbursement 10 / 11 / 2006
Mailing Address 1023 31st Street NW Floor 4		Amount of Each Disbursement this Period 12346.85
City Washington State DC Zip Code 20007-4458	Purpose of Disbursement Media Buy Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	75313.75
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. The Levatino Group		Transaction ID: B-E-8345 Date of Disbursement 10 / 14 / 2006
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 761.00
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Partnership 202		Transaction ID: B-E-8332 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 51849		Amount of Each Disbursement this Period 1500.00
City Lafayette State LA Zip Code 70505-1849	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Rent Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Political Firm LLC		Transaction ID: B-E-8277 Date of Disbursement 10 / 15 / 2006
Mailing Address 30959 Summer Breeze Drive		Amount of Each Disbursement this Period 2975.00
City Denham Springs State LA Zip Code 70726-1597	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Purchase of Voter Files Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5236.00
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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. The Political Firm LLC		Transaction ID: B-E-8331 Date of Disbursement 10 / 15 / 2006
Mailing Address 30959 Summer Breeze Drive		Amount of Each Disbursement this Period 2500.00
City Denham Springs State LA Zip Code 70726-1597	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Strategic Campaign Consulting Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marilyn Lee		Transaction ID: B-E-6962 Date of Disbursement 10 / 15 / 2006
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1184.73
City Lafayette State LA Zip Code 70506-3334	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Salary Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Crown Decal Printers		Transaction ID: B-E-8278 Date of Disbursement 10 / 16 / 2006
Mailing Address 141 Decal Street		Amount of Each Disbursement this Period 1776.60
City Lafayette State LA Zip Code 70508-3350	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Signs Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5461.33
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
Charles Boustany JR MD for Congress, INC

A. Iberia Bank Full Name (Last, First, Middle Initial) Mailing Address 200 W Congress Street City Lafayette State LA Zip Code 70501-6873 Purpose of Disbursement Service Fee Candidate Name		Transaction ID: B-E-8289 Date of Disbursement 10 / 16 / 2006 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

B. International Rice Festival Full Name (Last, First, Middle Initial) Mailing Address PO Box 2336 City Crowley State LA Zip Code 70527-2336 Purpose of Disbursement Program Expense Candidate Name		Transaction ID: B-E-8310 Date of Disbursement 10 / 18 / 2006 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

SUBTOTAL of Disbursements This Page (optional)

260.00

TOTAL This Period (last page this line number only)

267924.10

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. National Republican Congressional Comm.		Transaction ID: B-E-8343 Date of Disbursement 10 / 04 / 2006
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 65000.00
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer of Excess Funds Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Chris Chocola for Congress Inc.		Transaction ID: B-E-8373 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 6728		Amount of Each Disbursement this Period 2000.00
City South Bend State IN Zip Code 46660-6728	Purpose of Disbursement Contribution Candidate Name Christopher J. Chocola Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Chris Shays for Congress		Transaction ID: B-E-8367 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 275		Amount of Each Disbursement this Period 2000.00
City Fairfield State CT Zip Code 06824-0275	Purpose of Disbursement Contribution Candidate Name Christopher Shays Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	69000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Cubin for Congress Inc.		Transaction ID: B-E-8377 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 4657		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Casper	State WY	
Zip Code 82604-0657		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name Barbara L Cubin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WY District: 1		

Full Name (Last, First, Middle Initial) B. Fortenberry for Congress		Transaction ID: B-E-8375 Date of Disbursement 10 / 10 / 2006
Mailing Address 6415 Rainier Drive		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lincoln	State NE	
Zip Code 68510-4128		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name Jeffrey L Fortenberry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE District: 1		

Full Name (Last, First, Middle Initial) C. Friends of Clay Shaw		Transaction ID: B-E-8371 Date of Disbursement 10 / 10 / 2006
Mailing Address 2600 NE 14th Street Causeway		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Pompano Beach	State FL	
Zip Code 33062-8224		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name E. Clay Shaw, Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 22		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Friends of Don Sherwood		Transaction ID: B-E-8372 Date of Disbursement 10 / 10 / 2006
Mailing Address 81 Warren Street		Amount of Each Disbursement this Period 2100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Tunkhannock	State PA	
Zip Code 18657-1507		
Purpose of Disbursement Partial Refund 10/18/06 Category/Type: 011		
Candidate Name Donald Sherwood		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 10		

Full Name (Last, First, Middle Initial) B. Heather Wilson for Congress		Transaction ID: B-E-8368 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 14070		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Albuquerque	State NM	
Zip Code 87191-4070		
Purpose of Disbursement Contribution Category/Type: 011		
Candidate Name Heather A Wilson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NM District: 1		

Full Name (Last, First, Middle Initial) C. Jeb Bradley for Congress		Transaction ID: B-E-8380 Date of Disbursement 10 / 10 / 2006
Mailing Address 645 S Main Street		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Wolfeboro	State NH	
Zip Code 03894-4419		
Purpose of Disbursement Contribution Category/Type: 011		
Candidate Name Joseph E Bradley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District: 1		

SUBTOTAL of Disbursements This Page (optional) ▶	6100.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Kuhl for Congress		Transaction ID: B-E-8374 Date of Disbursement 10 / 10 / 2006
Mailing Address 10 Gansevoort Street		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Bath State NY Zip Code 14810-1611	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name John Kuhl		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Hart for Congress		Transaction ID: B-E-8378 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 435		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Wexford State PA Zip Code 15090-0435	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name Melissa A Hart		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Simmons for Congress		Transaction ID: B-E-8369 Date of Disbursement 10 / 10 / 2006
Mailing Address PO Box 268		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Stonington State CT Zip Code 06378-0268	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name Robert R Simmons		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Sue Kelly for Congress		Transaction ID: B-E-8376 Date of Disbursement 10 / 10 / 2006	
Mailing Address PO Box 599		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Katonah	State NY		Zip Code 10536-0599
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name Sue W Kelly			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 19			

Full Name (Last, First, Middle Initial) B. Sweeney For Congress Committee		Transaction ID: B-E-8370 Date of Disbursement 10 / 10 / 2006	
Mailing Address PO Box 4698		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Saratoga Springs	State NY		Zip Code 12866-8030
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name John E Sweeney			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 20			

Full Name (Last, First, Middle Initial) C. Walsh For Congress Committee		Transaction ID: B-E-8379 Date of Disbursement 10 / 10 / 2006	
Mailing Address 306 Winkworth Parkway		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
City Syracuse	State NY		Zip Code 13215-1550
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name James T Walsh			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 25			

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Bachmann for Congress		Transaction ID: B-E-8333 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 49756		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Blaine State MN Zip Code 55449-0756	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name Michele Bachmann		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Bass Victory Committee		Transaction ID: B-E-8280 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 3451		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Concord State NH Zip Code 03302-3451	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name Charles Bass		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Coloradans for Rick O'Donnell		Transaction ID: B-E-8281 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 260693		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lakewood State CO Zip Code 80226-0693	011 Category/Type	
Purpose of Disbursement Contribution		
Candidate Name Rick O'Donnell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Gard for Congress		Transaction ID: B-E-8337 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 277		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Green Bay	State WI	
Zip Code 54305-0277		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name John G Gard		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 8		

Full Name (Last, First, Middle Initial) B. Joy Padgett for Congress		Transaction ID: B-E-8338 Date of Disbursement 10 / 15 / 2006
Mailing Address 871 Walnut Street		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Coshocton	State OH	
Zip Code 43812-1649		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name Joy Padgett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 18		

Full Name (Last, First, Middle Initial) C. Lamborn for Congress		Transaction ID: B-E-8340 Date of Disbursement 10 / 15 / 2006
Mailing Address 5170 N Union Boulevard		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Colorado Springs	State CO	
Zip Code 80918-2045		
Purpose of Disbursement Contribution Category/Type 011		
Candidate Name Douglas Lamborn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District: 5		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

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<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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Mike Sodrel for Congress		Transaction ID: B-E-8279 Date of Disbursement 10 / 15 / 2006
Mailing Address 702 N Shore Drive Suite 500		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Jeffersonville State IN Zip Code 47130-3104	Purpose of Disbursement Contribution Candidate Name Mike Sodrel Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 9	

Full Name (Last, First, Middle Initial) B. Mike Whalen Victory Committee '06		Transaction ID: B-E-8334 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 750		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Bettendorf State IA Zip Code 52722-0013	Purpose of Disbursement Contribution Candidate Name Michael Whalen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 1	

Full Name (Last, First, Middle Initial) C. Ray Meier for Congress Committee		Transaction ID: B-E-8336 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 120		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Utica State NY Zip Code 13503-0120	Purpose of Disbursement Contribution Candidate Name Ray Meier Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 24	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	_____

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

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<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)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Roskam for Congress Committee		Transaction ID: B-E-8335 Date of Disbursement 10 / 15 / 2006
Mailing Address 1919 Briarcliffe Boulevard		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Wheaton State IL Zip Code 60187-8573	Purpose of Disbursement Contribution Category/Type 011	
Candidate Name Peter Roskam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sali for Congress Committee		Transaction ID: B-E-8339 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 71		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Kuna State ID Zip Code 83634-0071	Purpose of Disbursement Contribution Category/Type 011	
Candidate Name William Sali		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Shelley Sekula-Gibbs for Congress Campaign Committee		Transaction ID: B-E-8385 Date of Disbursement 10 / 15 / 2006
Mailing Address PO Box 890954		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Houston State TX Zip Code 77289-0954	Purpose of Disbursement Contribution Category/Type 011	
Candidate Name Shelley Sekula-Gibbs		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	116100.00