

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

REPUBLICAN PARTY OF LOUISIANA

ADDRESS (number and street) C/O RED CURVE SOLUTIONS  
500 CUMMINGS CENTER, SUITE 4400  
BEVERLY MA 01915

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00187450

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 09 / 01 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. DANIEL G. KYLE

Signature of Treasurer Mr. DANIEL G. KYLE [Electronically Filed] Date 02 / 20 / 2015

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**REPUBLICAN PARTY OF LOUISIANA**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		17403.15
(b) Cash on Hand at Beginning of Reporting Period.....	33192.13	
(c) Total Receipts (from Line 19) .....	173386.25	938107.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	206578.38	955510.79
7. Total Disbursements (from Line 31).....	144579.30	893511.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	61999.08	61999.08
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	3800.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**REPUBLICAN PARTY OF LOUISIANA**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8366.50	79691.16
(ii) Unitemized .....	13009.75	82569.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21376.25	162260.26
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	21376.25	166260.26
12. Transfers From Affiliated/Other Party Committees.....	152010.00	618763.01
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	3.20
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	1500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	151581.17
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	151581.17
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	173386.25	938107.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	173386.25	786526.47

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	9677.63	104231.84
(ii) Non-Federal Share.....	36406.30	390424.06
(b) Other Federal Operating Expenditures .....	51645.46	202335.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	97729.39	696991.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	100.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	46849.91	196420.08
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	46849.91	196420.08
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	144579.30	893511.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	108173.00	503087.65

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21376.25	166260.26
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21376.25	166160.26
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	61323.09	306567.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	61323.09	306564.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. JOHN AMATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1615 POYDRAS ST 22FL

City NEW ORLEANS	State LA	Zip Code 70112
---------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11Al.17170**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1415 7TH ST

City LAKE CHARLES	State LA	Zip Code 70601
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FEC ID number of contributing federal political committee. **C**

Name of Employer CPSB	Occupation SUBSTITUTE TEACHER
--------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : SA11Al.17275**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 13600 QUAIL RUN AVE

City DENHAM SPRINGS	State LA	Zip Code 70726
------------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENT
-----------------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2014  
**Transaction ID : SA11Al.17300**

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. MR. WALTER H CLAIBORNE III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 08 / 2014 <b>Transaction ID : SA11AI.17116</b>
Mailing Address 14297 CLAIBORNE RD BELLA VISTA PLANTATION		Amount of Each Receipt this Period 100.00
City BATCHELOR State LA Zip Code 70715	FEC ID number of contributing federal political committee. C	
Name of Employer SELF-EMPLOYED Occupation REAL STATE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) <b>B. CYNTHIA DORE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014 <b>Transaction ID : SA11AI.17344</b>
Mailing Address 1017 NANTUCKET DR UNIT D		Amount of Each Receipt this Period 75.00
City HOUSTON State TX Zip Code 77057	FEC ID number of contributing federal political committee. C	
Name of Employer RADJET SERVICES US INC Occupation ACCOUNTANT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00

Full Name (Last, First, Middle Initial) <b>C. MRS. AMANDA DOWNING</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 01 / 2014 <b>Transaction ID : SA11AI.17384</b>
Mailing Address 8501 MILLICENT WAY APT 1076		Amount of Each Receipt this Period 75.00
City SHREVEPORT State LA Zip Code 71115	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MRS. AMANDA DOWNING**  
Full Name (Last, First, Middle Initial)

Mailing Address 8501 MILLICENT WAY APT 1076

City SHREVEPORT	State LA	Zip Code 71115
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.25

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	16	/	2014

**Transaction ID : SA11AI.17365**

Amount of Each Receipt this Period  
8.25

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

Mailing Address 1705 CALHOUN ST

City NEW ORLEANS	State LA	Zip Code 70118
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FEC ID number of contributing federal political committee. **C**

Name of Employer OCHSNER HOSPITAL	Occupation PHYSICIAN
--------------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SA11AI.17281**

Amount of Each Receipt this Period  
1000.00

**C. MR. MARSHALL F GRAHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1015 W POINTE CIR

City SHREVEPORT	State LA	Zip Code 71106
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FEC ID number of contributing federal political committee. **C**

Name of Employer MID CO.	Occupation REAL ESTATE MANAGEMENT
-----------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2014

**Transaction ID : SA11AI.17256**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1258.25
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 108  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. REBECCA GRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 W POINTE CIR  
 City SHREVEPORT State LA Zip Code 71106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOME & OFFICE STORAHE LLC Occupation REAL ESTATE MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 23 / 2014  
**Transaction ID : SA11AI.17257**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CHRIS GUIDRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5396 COURTYARD DR  
 City GONZALES State LA Zip Code 70737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GUIDRY ASSOCIATES Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11AI.17363**  
 Amount of Each Receipt this Period  
 100.00

**C. ROBERT HETRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11930 S. HARRELL'S FERRY ROAD  
 City BATON ROUGE State LA Zip Code 70816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRINTING TECH Occupation PRINTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2014  
**Transaction ID : SA11AI.17377**  
 Amount of Each Receipt this Period  
 75.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 108  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MR. WARREN K HILDEBRAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 230 SENA DR  
 City METAIRIE State LA Zip Code 70005  
 Date of Receipt 09 / 09 / 2014  
**Transaction ID : SA11AI.17206**  
 Amount of Each Receipt this Period 1000.00  
 Aggregate Year-to-Date 1000.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼

**B. MR. LEONARD HOLLAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 CLOVERDALE DR.  
 City SHREVEPORT State LA Zip Code 71118  
 Date of Receipt 09 / 01 / 2014  
**Transaction ID : SA11AI.17389**  
 Amount of Each Receipt this Period 200.00  
 Aggregate Year-to-Date 205.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼

**C. LUCAS HUDDLESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 302 LOUISIANA DRIVE  
 PO BOX 742  
 City THIBODAUX State LA Zip Code 70302  
 Date of Receipt 09 / 12 / 2014  
**Transaction ID : SA11AI.17353**  
 Amount of Each Receipt this Period 75.00  
 Aggregate Year-to-Date 525.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 SELF ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1095.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 11 OF 108  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MR. MICHAEL D LOWRIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1835 GLEN COVE DR.  
 City BENTON State LA Zip Code 71111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACADIANA ENERGY Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 09 / 03 / 2014  
**Transaction ID : SA11Al.17417**  
 Amount of Each Receipt this Period 75.00

**B. MS. ZOE MEEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 BENEDETTE ST  
 City RAYVILLE State LA Zip Code 71269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 08 / 2014  
**Transaction ID : SA11Al.17109**  
 Amount of Each Receipt this Period 500.00

**C. MRS. CHESTER M MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5626 LUTTE TIGRE LANE  
 City LAKE CHARLES State LA Zip Code 70605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALFRED MILLER CONTRACTING Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2014  
**Transaction ID : SA11Al.17086**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 825.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. MR. FRANK S MORAN</b>		Date of Receipt
Mailing Address PO BOX 4848		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHREVEPORT	LA	71134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.17340</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
MORAN OIL	OWNER	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. ALICE BAIRD MUNGER</b>		Date of Receipt
Mailing Address 2729 CONSTANCE ST		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
NEW ORLEANS	LA	70130
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.17301</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN N PASCHALL</b>		Date of Receipt
Mailing Address 19 DUDLEY SQ		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHREVEPORT	LA	71106
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.17137</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
PASCHALL INV	PRES	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. MRS. PEGGY SUE SCOTT</b>		Date of Receipt
Mailing Address 743 WOODVIEW CT		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
BATON ROUGE	LA	70810
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Transaction ID : SA11Al.17088
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>B. VINSON SERIO</b>		Date of Receipt
Mailing Address 4416 WEST ESPLANADE AVENUE		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
METAIRIE	LA	70006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="675.00"/>	
		Transaction ID : SA11Al.17358
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

Full Name (Last, First, Middle Initial) <b>C. RICHARD SOBERS</b>		Date of Receipt
Mailing Address 2082 TURNER ROAD		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
ETHEL	LA	70830
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
DEALERTRACK	NOTARY PUBLIC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="270.00"/>	
		Transaction ID : SA11Al.17356
		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="605.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 14 OF 108  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. RALPH W STEPHENSON JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 333 LEE AVE APT 381  
 City State Zip Code  
 BATON ROUGE LA 70808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INFORMATION REQUESTED INFORMATION REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 09 / 2014  
**Transaction ID : SA11Al.17165**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS RUTH ULRICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 406 FORSYTHE AVE  
 City State Zip Code  
 MONROE LA 71201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CENTURYTEL PLANNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2014  
**Transaction ID : SA11Al.17302**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN E WADE II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 2ND ST  
 City State Zip Code  
 NEW ORLEANS LA 70130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED AUTHOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2014  
**Transaction ID : SA11Al.17074**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 108  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

**A. MR. JEFFREY WILLIAMSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2601 PARGOUD BLVD

City MONROE State LA Zip Code 71201

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

Name of Employer ENTREPRENEUR Occupation ENTREPRENEUR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 366.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : SA11AI.17414**

Amount of Each Receipt this Period  
 8.25

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8.25
<b>TOTAL</b> This Period (last page this line number only).....▶	8366.50

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 108
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial) <b>A. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 310 FIRST STREET SE		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA12.17063</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="71240.00"/>
	<input type="text" value="523694.75"/>	

Full Name (Last, First, Middle Initial) <b>B. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 310 FIRST STREET SE		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA12.17277</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="12500.00"/>
	<input type="text" value="536194.75"/>	

Full Name (Last, First, Middle Initial) <b>C. REPUBLICAN NATIONAL COMMITTEE</b>		Date of Receipt
Mailing Address 310 FIRST STREET SE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA12.17299</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="68270.00"/>
	<input type="text" value="604464.75"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="152010.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="152010.00"/>



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. 2PAUL'S**

Mailing Address 2668 JOHNSON ST  
SUITE C4

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15802

Amount of Each Disbursement this Period

27.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ACADIAN RELIGIOUS & GIFTS**

Mailing Address 2819 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15667

Amount of Each Disbursement this Period

481.82

Full Name (Last, First, Middle Initial)

**C. AIRNET**

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement  
TELEPHONE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15668

Amount of Each Disbursement this Period

6050.21

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

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

6532.03

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. AKIRA**

Mailing Address 3226 N ARNOULT RD

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15752

Amount of Each Disbursement this Period

3	1	.	8	1
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ALBERTSONS**

Mailing Address 4400 AMBASSADOR CAFFERY PKWY

City State Zip Code  
LAFAYETTE LA 80503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	4		

Transaction ID : SB21B.15801

Amount of Each Disbursement this Period

9	.	6	8
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ALFORD & DOVE PROPERTIES LLC**

Mailing Address PO BOX 2817

City State Zip Code  
HOUMA LA 70361

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.15669

Amount of Each Disbursement this Period

6	5	0	.	0	0
---	---	---	---	---	---

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

6	5	0	.	0	0
---	---	---	---	---	---

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

6	5	0	.	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. AMERICA RISING LLC**

Mailing Address 1555 WILSON BLVD STE 307

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
RESEARCH CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15671

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BRADLEY ASHLOCK**

Mailing Address 830 VERNAL LANE

City SHREVEPORT State LA Zip Code 71118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15677

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address 208 AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:MOBILE PHONE EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15793

Amount of Each Disbursement this Period

106.73

[MEMO ITEM]

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

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

1250.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:MOBILE PHONE EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15810

Amount of Each Disbursement this Period

106.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DUSTIN BREWSTER**

Mailing Address 550 LEE DR APT 235

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15683

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. DUSTIN BREWSTER**

Mailing Address 550 LEE DR APT 235

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB21B.15684

Amount of Each Disbursement this Period

250.00

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. BROADDUS BURGER**

Mailing Address 1940 MOSS STREET

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB21B.15803**

Amount of Each Disbursement this Period

11.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. KATHERINE D BROWN**

Mailing Address PO BOX 729

City SPRINGFIELD State LA Zip Code 70462

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : SB21B.15709**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. KATHERINE D BROWN**

Mailing Address PO BOX 729

City SPRINGFIELD State LA Zip Code 70462

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

**Transaction ID : SB21B.15710**

Amount of Each Disbursement this Period

250.00

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

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

500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SARAH BRYSON**

Mailing Address 106 OAK CREST DR

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2014

Transaction ID : **SB21B.15773**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. SARAH BRYSON**

Mailing Address 106 OAK CREST DR

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Transaction ID : **SB21B.15774**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. CAPITAL BUSINESS SERVICES LLC**

Mailing Address 14423 OLD HAMMOND HIGHWAY SUITE A

City BATON ROUGE State LA Zip Code 70816

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : **SB21B.15678**

Amount of Each Disbursement this Period

1545.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2045.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. CC COFFEE HOUSE**

Mailing Address 120 NORTH COLLEGE RD

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : **SB21B.15788**

Amount of Each Disbursement this Period

8	.	8	0
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CC COFFEE HOUSE**

Mailing Address 120 NORTH COLLEGE RD

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : **SB21B.15790**

Amount of Each Disbursement this Period

8	.	8	1
---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CHARLES ROBERT CARTER PROPERTIES**

Mailing Address 12030 LAKELAND BLVD SUITE 101

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement  
RENT & UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : **SB21B.15680**

Amount of Each Disbursement this Period

3	5	3	1	.	0	7
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	5	3	1	.	0	7
---	---	---	---	---	---	---

3	5	3	1	.	0	7
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. CHEVRON**

Mailing Address 1808 E PINHOOK RD

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
HUFFAKER REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : **SB21B.15691**

Amount of Each Disbursement this Period

4	1	.	0	3
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CHICK FIL A**

Mailing Address COLLEGE DRIVE

City BATON ROUGE State LA Zip Code 70821

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	1	4

Transaction ID : **SB21B.15746**

Amount of Each Disbursement this Period

1	1	.	0	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CHICK FIL A**

Mailing Address COLLEGE DRIVE

City BATON ROUGE State LA Zip Code 70821

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

Transaction ID : **SB21B.15791**

Amount of Each Disbursement this Period

5	.	3	3
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[MEMO ITEM]

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. COMFORT SUITES BATON ROUGE**

Mailing Address 3045 VALLEY RD

City State Zip Code  
BATON ROUGE LA 70808

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : **SB21B.15741**

Amount of Each Disbursement this Period

9	1	.	2	7
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CRACKER BARREL**

Mailing Address 320 JOHNSTON ST

City State Zip Code  
LAFAYETTE LA 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	4

Transaction ID : **SB21B.15789**

Amount of Each Disbursement this Period

2	1	.	3	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CREATIVE DIRECT LLC**

Mailing Address 25 E. MAIN STREET

City State Zip Code  
RICHMOND VA 23219

Purpose of Disbursement  
DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	4

Transaction ID : **SB21B.15681**

Amount of Each Disbursement this Period

3	1	9	6	.	0	0
---	---	---	---	---	---	---

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

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

3	1	9	6	.	0	0
---	---	---	---	---	---	---

3	1	9	6	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JASON DORE**

Mailing Address 2221 OLIVE ST

City State Zip Code  
BATON ROUGE LA 70806

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 23 / 2014

**Transaction ID : SB21B.15700**

Amount of Each Disbursement this Period

449.99

Full Name (Last, First, Middle Initial)

**B. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City State Zip Code  
MONROE LA 71201

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 05 / 2014

**Transaction ID : SB21B.15702**

Amount of Each Disbursement this Period

582.65

Full Name (Last, First, Middle Initial)

**C. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City State Zip Code  
MONROE LA 71201

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 19 / 2014

**Transaction ID : SB21B.15703**

Amount of Each Disbursement this Period

1418.02

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

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

2450.66

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City MONROE State LA Zip Code 71201

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15704

Amount of Each Disbursement this Period

1015.23

Full Name (Last, First, Middle Initial)

**B. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15706

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15781

Amount of Each Disbursement this Period

699.86

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

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

2215.09

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15783

Amount of Each Disbursement this Period

67.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15784

Amount of Each Disbursement this Period

56.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15786

Amount of Each Disbursement this Period

115.83

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15782

Amount of Each Disbursement this Period

206.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15797

Amount of Each Disbursement this Period

705.51

Full Name (Last, First, Middle Initial)

**C. TODD ESCALONA**

Mailing Address 102 COULEE SHORE DR.

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15811

Amount of Each Disbursement this Period

206.64

[MEMO ITEM]

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

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

705.51

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. EVANGELINE OAK LLC**

Mailing Address PO BOX 1026

City MADISONVILLE State LA Zip Code 70447

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

Transaction ID : **SB21B.15694**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. EXXON MOBLIE**

Mailing Address CIRCLE K

City BATON ROUGE State LA Zip Code 70820

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : **SB21B.15748**

Amount of Each Disbursement this Period

40.08

Category/  
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
AMEX CHARGE 9/09/14 - ONLINE ADVERTISING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2014

Transaction ID : **SB21B.17436**

Amount of Each Disbursement this Period

161.27

Category/  
Type

[MEMO ITEM]

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD STE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : SB21B.15697**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. KAITLIN O. FORAN**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

**Transaction ID : SB21B.15707**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. KAITLIN O. FORAN**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB21B.15708**

Amount of Each Disbursement this Period

500.00

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

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

2500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. STEPHANIE GARDNER**

Mailing Address 3645 GLADIOLA CT APT G

City State Zip Code  
BATON ROUGE LA 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014

Transaction ID : SB21B.15777

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. STEPHANIE GARDNER**

Mailing Address 3645 GLADIOLA CT APT G

City State Zip Code  
BATON ROUGE LA 70808

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB21B.15778

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. GREAT LAKE**

Mailing Address 48668 S COUNTY ROAD 214

City State Zip Code  
MUTUAL OK 73853

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014

Transaction ID : SB21B.15729

Amount of Each Disbursement this Period

150.00

[MEMO ITEM]

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

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

500.00



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. HUNTER HALL**

Mailing Address 38129 SPRINGWOOD AVE

City PRARIEVILLE State LA Zip Code 70769

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15698**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HUNTER HALL**

Mailing Address 38129 SPRINGWOOD AVE

City PRARIEVILLE State LA Zip Code 70769

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15699**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City PONCHATOULA State LA Zip Code 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15672**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City State Zip Code  
PONCHATOULA LA 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15673**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City State Zip Code  
PONCHATOULA LA 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15674**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ASHLYN HEMINGWAY**

Mailing Address 41561 RUE MAISON

City State Zip Code  
PONCHATOULA LA 70454

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15675**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. HERRITAGE GRILL**

Mailing Address 111 VETERANS BLVD

City State Zip Code  
METAIRIE LA 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15730

Amount of Each Disbursement this Period

7	3	.	5	4
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HILTON**

Mailing Address 1521 W PINHOOK RD

City State Zip Code  
LAFAYETTE LA 70503

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15769

Amount of Each Disbursement this Period

2	5	2	.	5	9
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HOUSTONS**

Mailing Address 4241 VETERANS MEMORIAL BLVD

City State Zip Code  
METAIRIE LA 70006

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15747

Amount of Each Disbursement this Period

2	4	.	0	3
---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
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0	0	0
---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15686**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
STIPEND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15689**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15690**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2014

**Transaction ID : SB21B.15692**

Amount of Each Disbursement this Period

60.13
-------

Full Name (Last, First, Middle Initial)

**B. KIM JANCA**

Mailing Address 6132 W AZALEA DR

City State Zip Code  
LAKE CHARLES LA 70605

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB21B.15711**

Amount of Each Disbursement this Period

499.46
--------

Full Name (Last, First, Middle Initial)

**C. JUDICE INN INC**

Mailing Address 3134 JOHNSTON ST

City State Zip Code  
LAFAYETTE LA 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB21B.15805**

Amount of Each Disbursement this Period

23.90
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**[MEMO ITEM]**

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

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

559.59
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. BARBARA KELLER**

Mailing Address 5581 MAPLE RIDGE DR

City NEW ORLEANS State LA Zip Code 70129

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2014

**Transaction ID : SB21B.15676**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. LABI**

Mailing Address 3113 VALLEY CREEK DR

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

**Transaction ID : SB21B.15714**

Amount of Each Disbursement this Period

625.00

Full Name (Last, First, Middle Initial)

**C. LA MADELEINE**

Mailing Address 2207 I KALISTE SALOOM ROAD

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB21B.15799**

Amount of Each Disbursement this Period

31.28

**[MEMO ITEM]**

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

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

1625.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LEGACY KITCHEN**

Mailing Address 759 VETERANS BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15742

Amount of Each Disbursement this Period

4	7	.	1	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LOGAN FARMS**

Mailing Address 2817 A JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	4		

Transaction ID : SB21B.15795

Amount of Each Disbursement this Period

1	0	.	7	3
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. LOGAN FARMS**

Mailing Address 2817 A JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	4		

Transaction ID : SB21B.15798

Amount of Each Disbursement this Period

1	6	.	7	4
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[MEMO ITEM]

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

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

0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LOGAN FARMS**

Mailing Address 2817 A JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **SB21B.15800**

Amount of Each Disbursement this Period

16.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LOGAN FARMS**

Mailing Address 2817 A JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **SB21B.15809**

Amount of Each Disbursement this Period

17.27

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. LOGANS ROADHOUSE**

Mailing Address 2619 SOUTH SPORTSMAN LANE

City GONZALES State LA Zip Code 70737

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : **SB21B.15749**

Amount of Each Disbursement this Period

52.25

[MEMO ITEM]

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LOGIC NATION, INC**

Mailing Address 910 PIERREMONT ROAD SUITE 216

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

Transaction ID : **SB21B.15716**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL MAHFOUZ**

Mailing Address 1922 BROADWAY APT A

City NEW ORLEANS State LA Zip Code 70118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : **SB21B.15720**

Amount of Each Disbursement this Period

335.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL MAHFOUZ**

Mailing Address 1922 BROADWAY APT A

City NEW ORLEANS State LA Zip Code 70118

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **SB21B.15721**

Amount of Each Disbursement this Period

250.00

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

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

1585.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. MELE PRINTING**

Mailing Address 619 N TYLER ST

City COVINGTON State LA Zip Code 70433

Purpose of Disbursement  
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	3		2	0	1	4		

Transaction ID : SB21B.15717

Amount of Each Disbursement this Period

1	9	7	.	6	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MIDDENDORFS**

Mailing Address 30160 HWY 51 S

City MANCHAC State LA Zip Code 70421

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	3		2	0	1	4		

Transaction ID : SB21B.15735

Amount of Each Disbursement this Period

4	5	.	2	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MOE'S SW GRILL**

Mailing Address 720 VETERANS BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	3		2	0	1	4		

Transaction ID : SB21B.15762

Amount of Each Disbursement this Period

3	5	.	6	7
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[MEMO ITEM]

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

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

1	9	7	.	6	0
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1	9	7	.	6	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. MR EDS OYSTER BAR**

Mailing Address 3117 21ST ST

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15745

Amount of Each Disbursement this Period

7	1	.	4	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MR ROOS DELI**

Mailing Address 3501 SERVEN AVE  
STE 1A

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15736

Amount of Each Disbursement this Period

4	4	.	2	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MR ROOS DELI**

Mailing Address 3501 SERVEN AVE  
STE 1A

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15763

Amount of Each Disbursement this Period

2	2	.	3	9
---	---	---	---	---

[MEMO ITEM]

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

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

0	0	.	0	0
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0	0	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JONAH MUMPHREY**

Mailing Address 11335 ARCHERY DR

City State Zip Code  
BATON ROUGE LA 70815

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	05	/	2014

**Transaction ID : SB21B.15705**

Amount of Each Disbursement this Period

499.98
--------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. NEW ORLEANS HAMBURGER & SEAFOOD**

Mailing Address 1005 S CLEARVIEW PKWY

City State Zip Code  
JEFFERSON LA 70121

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	03	/	2014

**Transaction ID : SB21B.15738**

Amount of Each Disbursement this Period

68.48
-------

Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. NEW ORLEANS MARRIOTT**

Mailing Address 555 CANAL ST

City State Zip Code  
NEW ORLEANS LA 70130

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:GROUND TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	03	/	2014

**Transaction ID : SB21B.15761**

Amount of Each Disbursement this Period

11.20
-------

Category/  
Type

**[MEMO ITEM]**

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

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

499.98
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SPENCER NICHOLS**

Mailing Address 4000 LAKE BEAU PTRE BLVD #99

City State Zip Code  
BATON ROUGE LA 70820

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15775

Amount of Each Disbursement this Period

823.07

Full Name (Last, First, Middle Initial)

**B. SPENCER NICHOLS**

Mailing Address 4000 LAKE BEAU PTRE BLVD #99

City State Zip Code  
BATON ROUGE LA 70820

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15776

Amount of Each Disbursement this Period

815.72

Full Name (Last, First, Middle Initial)

**C. NORGATE INVESTORS C/O 1ST LAKE COMMERCIAL**

Mailing Address 3925 N I-10 SERVICE ROAD W  
SUITE 130

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
RENT & UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

Transaction ID : SB21B.15722

Amount of Each Disbursement this Period

2067.50

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

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

3706.29

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address P.O. BOX 9020

City DES MOINES State IA Zip Code 50368

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2014

Transaction ID : SB21B.15723

Amount of Each Disbursement this Period

167.62

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address P.O. BOX 9020

City DES MOINES State IA Zip Code 50368

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15724

Amount of Each Disbursement this Period

29.40

Full Name (Last, First, Middle Initial)

**C. OFFICE DEPOT**

Mailing Address P.O. BOX 9020

City DES MOINES State IA Zip Code 50368

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 25 / 2014

Transaction ID : SB21B.15725

Amount of Each Disbursement this Period

29.40

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

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

226.42

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address P.O. BOX 9020

City State Zip Code  
DES MOINES IA 50368

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	4		

**Transaction ID : SB21B.15807**

Amount of Each Disbursement this Period

7	2	.	0	5
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. OHANA FUSION & SUSHI**

Mailing Address 3559 18TH ST

City State Zip Code  
METAIRIE LA 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	3		2	0	1	4		

**Transaction ID : SB21B.15751**

Amount of Each Disbursement this Period

2	8	.	6	0
---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. PC INVESTMENTS INC**

Mailing Address 2216 FORSYTHE AVE SUITE B

City State Zip Code  
MONROE LA 71201

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB21B.15726**

Amount of Each Disbursement this Period

1	0	7	9	.	1	6
---	---	---	---	---	---	---

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

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

1	0	7	9	.	1	6
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1	0	7	9	.	1	6
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. CARLIN PERRY**

Mailing Address 10648 EFFRINGHAM AVE

City State Zip Code  
BATON ROUGE LA 70815

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15679**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. POPEYES**

Mailing Address 1300 WEST PINHOOK ROAD

City State Zip Code  
LAFAYETTE LA 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15785**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. POPEYES**

Mailing Address 1300 WEST PINHOOK ROAD

City State Zip Code  
LAFAYETTE LA 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.15796**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. REES REALTY CORPORATION**

Mailing Address PMB 540 2851 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

Transaction ID : SB21B.15727

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

**B. ROCKETFIRE PIZZA**

Mailing Address 612 VETERANS MEMORIAL BLV

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15744

Amount of Each Disbursement this Period

47.08

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ROCKETFIRE PIZZA**

Mailing Address 612 VETERANS MEMORIAL BLV

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15764

Amount of Each Disbursement this Period

61.57

[MEMO ITEM]

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

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

1200.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. RRPEC**

Mailing Address PO BOX 12445

City ALEXANDRIA State LA Zip Code 71315

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

**Transaction ID : SB21B.15770**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. SHELL**

Mailing Address 11440 PERKINS ROAD

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

**Transaction ID : SB21B.15732**

Amount of Each Disbursement this Period

42.61

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. SHELL**

Mailing Address 11440 PERKINS ROAD

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

**Transaction ID : SB21B.15734**

Amount of Each Disbursement this Period

29.38

**[MEMO ITEM]**

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

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

500.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

### A. SHELL

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15737

Amount of Each Disbursement this Period

41.91

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. SHELL

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15743

Amount of Each Disbursement this Period

40.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. SHELL

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15750

Amount of Each Disbursement this Period

43.43

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15753

Amount of Each Disbursement this Period

40.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15754

Amount of Each Disbursement this Period

40.28

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15755

Amount of Each Disbursement this Period

37.63

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15756

Amount of Each Disbursement this Period

3	6	.	2	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15757

Amount of Each Disbursement this Period

4	2	.	1	6
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	4		

Transaction ID : SB21B.15758

Amount of Each Disbursement this Period

4	5	.	9	9
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[MEMO ITEM]

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
HUFFAKER RIEMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15687**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
HUFFAKER RIEMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15688**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SHELL**

Mailing Address 11440 PERKINS ROAD

City State Zip Code  
BATON ROUGE LA 70810

Purpose of Disbursement  
HUFFAKER RIEMBURSEMENT:TRAVEL:FUEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB21B.15693**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

### A. SHOGUN JAPANESE

Mailing Address 2325 VETERANS BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15739

Amount of Each Disbursement this Period

5	1	.	7	7
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B. SHOGUN JAPANESE

Mailing Address 2325 VETERANS BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15765

Amount of Each Disbursement this Period

7	7	.	2	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### C. SHOGUN JAPANESE

Mailing Address 2325 VETERANS BLVD

City METAIRIE State LA Zip Code 70002

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	4

Transaction ID : SB21B.15766

Amount of Each Disbursement this Period

8	6	.	0	0
---	---	---	---	---

[MEMO ITEM]

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

0	0	.	0	0
---	---	---	---	---

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

0	0	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SOHO ASIAN CUISINE**

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

Transaction ID : SB21B.15733

Amount of Each Disbursement this Period

25.64
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SOHO ASIAN CUISINE**

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

Transaction ID : SB21B.15759

Amount of Each Disbursement this Period

36.99
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. SOHO ASIAN CUISINE**

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

Transaction ID : SB21B.15760

Amount of Each Disbursement this Period

41.46
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[MEMO ITEM]

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

0.00
------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. SOHO ASIAN CUISINE**

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15767

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SOHO ASIAN CUISINE**

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15768

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JEFF STIDHAM**

Mailing Address 13323 BRIARGROVE AVE

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15701

Amount of Each Disbursement this Period

634.02

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

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

634.02

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. TARGET OUTREACH INC**

Mailing Address 700 W VIRGINIA ST SUITE 700  
TIMBERS BUILDING

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement  
LIST ACQUISITION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15780

Amount of Each Disbursement this Period

1138.00

Full Name (Last, First, Middle Initial)

**B. THE UPS STORE**

Mailing Address 2851 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15806

Amount of Each Disbursement this Period

32.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. TWINS**

Mailing Address 280 JOHNSON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15787

Amount of Each Disbursement this Period

7.55

[MEMO ITEM]

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

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

1138.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. TWINS**

Mailing Address 280 JOHNSON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15794

Amount of Each Disbursement this Period

22.94

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. TWINS**

Mailing Address 280 JOHNSON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB21B.15804

Amount of Each Disbursement this Period

8.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:AIRFARE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 03 / 2014

Transaction ID : SB21B.15731

Amount of Each Disbursement this Period

300.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. UNIVERSITY OF LOUISIANA**

Mailing Address 2819 JOHNSTON ST

City LAFAYETTE State LA Zip Code 70503

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:EVENT REGISTRATION FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

**Transaction ID : SB21B.15808**

Amount of Each Disbursement this Period

125.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address PO BOX 2100

City BATON ROUGE State LA Zip Code 70821-2100

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2014

**Transaction ID : SB21B.15812**

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address PO BOX 2100

City BATON ROUGE State LA Zip Code 70821-2100

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2014

**Transaction ID : SB21B.15813**

Amount of Each Disbursement this Period

500.00

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

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

720.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. VERVEMAIL**

Mailing Address 5348 VEGAS DR. STE. 289

City LAS VEGAS State NV Zip Code 89108

Purpose of Disbursement  
WEB DEVELOPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : SB21B.15814

Amount of Each Disbursement this Period

405.66

Full Name (Last, First, Middle Initial)

**B. MR. ROGER VILLERE**

Mailing Address 838 AURORA ST

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement  
REIMBURSEMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014

Transaction ID : SB21B.15728

Amount of Each Disbursement this Period

2366.80

Full Name (Last, First, Middle Initial)

**C. LAUREN VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 05 / 2014

Transaction ID : SB21B.15715

Amount of Each Disbursement this Period

495.79

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

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

3268.25

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JR MICHAEL J VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15718

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. JR MICHAEL J VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB21B.15719

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. WATSON VOICE & DATA INC**

Mailing Address 727 HIGH ST

City HOUMA State LA Zip Code 70360

Purpose of Disbursement  
DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2014

Transaction ID : SB21B.15815

Amount of Each Disbursement this Period

1439.34

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

2189.34

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

### A. SANTANA WHATLEY

Mailing Address 517 QUEEN ANNE DR

City SLIDELL State LA Zip Code 70460

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15771

Amount of Each Disbursement this Period

250.00

Category/  
Type

Full Name (Last, First, Middle Initial)

### B. SANTANA WHATLEY

Mailing Address 517 QUEEN ANNE DR

City SLIDELL State LA Zip Code 70460

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB21B.15772

Amount of Each Disbursement this Period

250.00

Category/  
Type

Full Name (Last, First, Middle Initial)

### C. KRISTY L. WILKINSON

Mailing Address 822 LOUISIANA AVE APT 822B

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2014

Transaction ID : SB21B.15712

Amount of Each Disbursement this Period

500.00

Category/  
Type

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

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. KRISTY L. WILKINSON**

Mailing Address 822 LOUISIANA AVE APT 822B

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB21B.15713

Amount of Each Disbursement this Period

1178.00

Full Name (Last, First, Middle Initial)

**B. ZEA ROTISSERIE & BREMETAIRIE**

Mailing Address 4450 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement  
VILLERE REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 03 / 2014

Transaction ID : SB21B.15740

Amount of Each Disbursement this Period

52.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ZOES KITCHEN**

Mailing Address 201 SETTLERS TRACE BLVD  
SUITE 2014

City LAFAYETTE State LA Zip Code 70508

Purpose of Disbursement  
ESCALONA REIMBURSEMENT:TRAVEL:FOOD

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2014

Transaction ID : SB21B.15792

Amount of Each Disbursement this Period

16.26

[MEMO ITEM]

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

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

1178.00

51280.85



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LUNDEN ALYSSA CHENEVERT**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15819**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LUNDEN ALYSSA CHENEVERT**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15837**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. KAREN F. CONNOLLY**

Mailing Address 6880 CHRISTOPHER AVE.

City GREENWELL SPRINGS State LA Zip Code 70739

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15820**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. KAREN F. CONNOLLY**

Mailing Address 6880 CHRISTOPHER AVE.

City GREENWELL SPRINGS State LA Zip Code 70739

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SB30B.15838**

Amount of Each Disbursement this Period

1500.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. JASON DORE**

Mailing Address 2221 OLIVE ST

City BATON ROUGE State LA Zip Code 70806

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

**Transaction ID : SB30B.15821**

Amount of Each Disbursement this Period

3710.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. JASON DORE**

Mailing Address 2221 OLIVE ST

City BATON ROUGE State LA Zip Code 70806

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SB30B.15839**

Amount of Each Disbursement this Period

3710.00

**[MEMO ITEM]**

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JOHN M EDWARDS**

Mailing Address 2302 PINEHURST DR

City State Zip Code  
MONROE LA 71201

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 30 / 2014

Transaction ID : **SB30B.15845**

Amount of Each Disbursement this Period

234.77

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 15 / 2014

Transaction ID : **SB30B.15822**

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JORDAN ELSBURY**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 30 / 2014

Transaction ID : **SB30B.15840**

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. DANIEL TODD ESCALONA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15823**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DANIEL TODD ESCALONA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15841**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. KAITLIN O. FORAN**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15824**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

**SCHEDULE B (FEC Form 3X)  
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"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. KAITLIN O. FORAN**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB30B.15842

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HUNTER HALL**

Mailing Address 38129 SPRINGWOOD AVE

City State Zip Code  
PRARIEVILLE LA 70769

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : SB30B.15825

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. HUNTER HALL**

Mailing Address 38129 SPRINGWOOD AVE

City State Zip Code  
PRARIEVILLE LA 70769

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : SB30B.15843

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : **SB30B.15826**

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ERIN HUFFAKER**

Mailing Address 3858 SOUTHPASS AVE

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : **SB30B.15844**

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City State Zip Code  
KINGWOOD TX 77339

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : **SB30B.15816**

Amount of Each Disbursement this Period

75.00

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

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

75.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **SB30B.15817**

Amount of Each Disbursement this Period

1640.81

Full Name (Last, First, Middle Initial)

**B. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL SERVICES/TAX(SEE MEMO ENTRIES)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **SB30B.15818**

Amount of Each Disbursement this Period

20876.67

Full Name (Last, First, Middle Initial)

**C. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **SB30B.15834**

Amount of Each Disbursement this Period

75.00

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

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

22592.48

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15835**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. INSPERITY PAYROLL SERVICES**

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement  
PAYROLL SERVICES/TAX(SEE MEMO ENTRIES)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15836**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. KIMBERLY JANCA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB30B.15846**

Amount of Each Disbursement this Period

**[MEMO ITEM]**

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

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JONAH MUMPHREY**

Mailing Address 11335 ARCHERY DR

City State Zip Code  
BATON ROUGE LA 70815

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : **SB30B.15827**

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JONAH MUMPHREY**

Mailing Address 11335 ARCHERY DR

City State Zip Code  
BATON ROUGE LA 70815

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 30 / 2014

Transaction ID : **SB30B.15847**

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. GARY SPENCER NICHOLS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City State Zip Code  
BATON ROUGE LA 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
09 / 15 / 2014

Transaction ID : **SB30B.15828**

Amount of Each Disbursement this Period

1916.67

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. GARY SPENCER NICHOLS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB30B.15848

Amount of Each Disbursement this Period

1916.67

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JEFFREY BRANT STIDHAM**

Mailing Address 13322 BRIARGROVE DRIVE

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : SB30B.15829

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JEFFREY BRANT STIDHAM**

Mailing Address 13322 BRIARGROVE DRIVE

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : SB30B.15849

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. JOHN AUSTIN STUKINS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **SB30B.15830**

Amount of Each Disbursement this Period

1750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JOHN AUSTIN STUKINS**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2014

Transaction ID : **SB30B.15850**

Amount of Each Disbursement this Period

1750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. LAUREN VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2014

Transaction ID : **SB30B.15831**

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. LAUREN VIZZA**

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT State LA Zip Code 71106

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15851**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. RACHEL VIZZA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15832**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. RACHEL VIZZA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB30B.15852**

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

Full Name (Last, First, Middle Initial)

**A. KRISTY L. WILKINSON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2014

Mailing Address 822 LOUISIANA AVE APT 822B

**Transaction ID : SB30B.15833**

City State Zip Code  
NEW ORLEANS LA 70115

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
PAYROLL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. KRISTY L. WILKINSON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address 822 LOUISIANA AVE APT 822B

**Transaction ID : SB30B.15853**

City State Zip Code  
NEW ORLEANS LA 70115

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
PAYROLL

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

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

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

46849.91
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 108
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**REPUBLICAN PARTY OF LOUISIANA**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>JAMESTOWN ASSOCIATES</b>	Nature of Debt (Purpose): FEA VOLUNTEER MASS MAIL
Mailing Address 5 MAPLETON ROAD SUITE 300	
City State Zip Code PRINCETON NJ 08540	

Outstanding Balance Beginning This Period <input type="text" value="3800.00"/>	<b>Transaction ID : SD10.5463</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3800.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="3800.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="3800.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="3800.00"/>

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF LOUISIANA**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15930</b> <b>ANEDOT</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10156 PERKINS ROAD SUITE 217F		Allocated Activity or Event Year-To-Date 467006.33	
City BATON ROUGE State LA Zip Code 70810	Category/ Type	Date 09 / 03 / 2014	
Purpose of Disbursement: MERCHANT FEES		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 45.21 + 170.08 = 215.29	
Activity or Event Identifier: <b>Administrative</b>			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15935</b> <b>DIRECT MAILING SERVICES, INC.</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12562 N. LAKE SHORE		Allocated Activity or Event Year-To-Date 473006.33	
City WALKER State LA Zip Code 70785	Category/ Type	Date 09 / 05 / 2014	
Purpose of Disbursement: DIRECT MAIL CONSULTING<25% FEDERAL		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1260.00 + 4740.00 = 6000.00	
Activity or Event Identifier: Administrative			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15938</b> <b>VISA BUSINESS</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 23078		Allocated Activity or Event Year-To-Date 473243.62	
City COLUMBUS State GA Zip Code 31902	Category/ Type	Date 09 / 05 / 2014	
Purpose of Disbursement: CREDIT CARD PAYMENT - SEE MEMO ENTRIES		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 49.83 + 187.46 = 237.29	
Activity or Event Identifier: Administrative			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1355.04		5097.54		6452.58

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: LOUISIANA OFFICE SUPPLY, Transaction ID: H4.15939. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: LOUISIANA OFFICE SUPPLY, Transaction ID: H4.15940. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: VISA BUSINESS, Transaction ID: H4.15941. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 115.50, NONFEDERAL SHARE 434.50, TOTAL AMOUNT 550.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15931
ANEDOT
Mailing Address 10156 PERKINS ROAD SUITE 217F
City BATON ROUGE State LA Zip Code 70810
Purpose of Disbursement: MERCHANT FEES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 473819.24
Date 09/08/2014
FEDERAL SHARE 5.38 NONFEDERAL SHARE 20.24 TOTAL AMOUNT 25.62

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15854
AMERICAN EXPRESS
Mailing Address 200 VESEY ST
City MANHATTAN State NY Zip Code 10080
Purpose of Disbursement: CREDIT CARD PAYMENT - SEE MEMO ENTRIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 479795.61
Date 09/09/2014
FEDERAL SHARE 1255.04 NONFEDERAL SHARE 4721.33 TOTAL AMOUNT 5976.37

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15855
HOTELS.COM
Mailing Address 5400 LBJ FREEWAY SUITE 500
City DALLAS State TX Zip Code 75240
Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:LODGING
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 479795.61
Date 09/09/2014
FEDERAL SHARE 0.00 NONFEDERAL SHARE 0.00 TOTAL AMOUNT 0.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1260.42, 4741.57, 6001.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) CHICK-FIL-A, Transaction ID : H4.15856, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 0.74, NONFEDERAL SHARE 2.79, TOTAL AMOUNT 3.53

Form B: Full Name (Last, First, Middle Initial) PAYPAL, Transaction ID : H4.15857, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 1.05, NONFEDERAL SHARE 3.95, TOTAL AMOUNT 5.00

Form C: Full Name (Last, First, Middle Initial) FEDEX, Transaction ID : H4.15858, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 1.63, NONFEDERAL SHARE 6.12, TOTAL AMOUNT 7.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: FEDEX Transaction ID: H4.15859. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form B: LOWE'S Transaction ID: H4.15860. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

Form C: SEARS ROEBUCK Transaction ID: H4.15861. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, Date, and a summary table for FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for SUBTOTAL showing FEDERAL SHARE (0.00), NONFEDERAL SHARE (0.00), and TOTAL AMOUNT (0.00).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for TOTAL showing FEDERAL SHARE, NONFEDERAL SHARE, and TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) WHATABURGER, Transaction ID : H4.15862, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 2.77, NONFEDERAL SHARE 10.44, TOTAL AMOUNT 13.21

Form B: Full Name (Last, First, Middle Initial) TWIN'S, Transaction ID : H4.15863, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 4.36, NONFEDERAL SHARE 16.42, TOTAL AMOUNT 20.78

Form C: Full Name (Last, First, Middle Initial) SHELL, Transaction ID : H4.15864, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 4.47, NONFEDERAL SHARE 16.83, TOTAL AMOUNT 21.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) CHICK-FIL-A, Transaction ID : H4.15865, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 5.89, NONFEDERAL SHARE 22.16, TOTAL AMOUNT 28.05

Form B: Full Name (Last, First, Middle Initial) WAL-MART, Transaction ID : H4.15866, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 5.90, NONFEDERAL SHARE 22.20, TOTAL AMOUNT 28.10

Form C: Full Name (Last, First, Middle Initial) WUFOO.COM, Transaction ID : H4.15867, Allocated Activity or Event: Administrative, Date: 09/09/2014, Amounts: FEDERAL SHARE 6.29, NONFEDERAL SHARE 23.66, TOTAL AMOUNT 29.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: PARTY TIME. Transaction ID: H4.15868. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Total Amount: 32.39.

Form B: CHELSEA'S CAFE. Transaction ID: H4.15869. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Total Amount: 35.86.

Form C: CARINO'S ITALIAN. Transaction ID: H4.15870. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Total Amount: 37.77.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15871
BET-R STORE
Mailing Address 2812 KALURAH ST
City BATON ROUGE State LA Zip Code 70808
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative
Allocated Activity or Event Year-To-Date: 479795.61
Date: 09/09/2014
FEDERAL SHARE: 8.03 NONFEDERAL SHARE: 30.21 TOTAL AMOUNT: 38.24

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15872
ACADIANA GRILLED CHEESE CO
Mailing Address 519 S PIERCE ST
City LAFAYETTE State LA Zip Code 70508
Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:FOOD
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative
Allocated Activity or Event Year-To-Date: 479795.61
Date: 09/09/2014
FEDERAL SHARE: 8.06 NONFEDERAL SHARE: 30.31 TOTAL AMOUNT: 38.37

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15873
OFFICE DEPOT
Mailing Address P.O. BOX 9020
City DES MOINES State IA Zip Code 50368
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative
Allocated Activity or Event Year-To-Date: 479795.61
Date: 09/09/2014
FEDERAL SHARE: 8.72 NONFEDERAL SHARE: 32.81 TOTAL AMOUNT: 41.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15874
ACADEMY SPORTS
Mailing Address 3401 DEREK DR
City LAKE CHARLES State LA Zip Code 70607
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/09/2014
FEDERAL SHARE 9.15 NONFEDERAL SHARE 34.44 TOTAL AMOUNT 43.59

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15875
PARTY CITY
Mailing Address 5700 JONSTON ST
City LAFAYETTE State LA Zip Code 70503
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/09/2014
FEDERAL SHARE 9.15 NONFEDERAL SHARE 34.44 TOTAL AMOUNT 43.59

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15877
PARTY CITY
Mailing Address 5700 JONSTON ST
City LAFAYETTE State LA Zip Code 70503
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/09/2014
FEDERAL SHARE 9.80 NONFEDERAL SHARE 36.88 TOTAL AMOUNT 46.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: MELE PRINTING COMPANY. Transaction ID: H4.15878. Allocated Activity: Administrative. Date: 09/09/2014. Total Amount: 46.80.

Form B: GOTOCITRIX.COM. Transaction ID: H4.15879. Allocated Activity: Administrative. Date: 09/09/2014. Total Amount: 49.00.

Form C: CHEVRON. Transaction ID: H4.15880. Allocated Activity: Administrative. Date: 09/09/2014. Total Amount: 51.40.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: ADOBE SYSTEMS, INC. Transaction ID: H4.15881. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: LA FONDA RESTAURANT Transaction ID: H4.15882. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: CHEVRON Transaction ID: H4.15883. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal showing Federal Share (0.00), NonFederal Share (0.00), and Total Amount (0.00).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total showing Federal Share, NonFederal Share, and Total Amount.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: LOVE'S COUNTRY STOREPORT. Transaction ID: H4.15884. Mailing Address: 751 LOBDELL HWY, PORT ALLEN, LA 70767. Purpose: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 479795.61. Date: 09/09/2014. Summary: FEDERAL SHARE 14.65, NONFEDERAL SHARE 55.10, TOTAL AMOUNT 69.75.

Form B: THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE. Transaction ID: H4.15885. Mailing Address: 1155 F STREET, NW, SUITE 400, WASHINGTON, DC 20004. Purpose: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 479795.61. Date: 09/09/2014. Summary: FEDERAL SHARE 15.38, NONFEDERAL SHARE 57.85, TOTAL AMOUNT 73.23.

Form C: ROMANOS MACARONI GRILL. Transaction ID: H4.15886. Mailing Address: 7031 YOUREE DR, SHREVEPORT, LA 71105. Purpose: AMEX CHARGE 9/09/14 - TRAVEL:FOOD. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 479795.61. Date: 09/09/2014. Summary: FEDERAL SHARE 15.67, NONFEDERAL SHARE 58.95, TOTAL AMOUNT 74.62.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15887 TIGER TRUCK STOP. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15888 TIGER TRUCK STOP. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15889 AT&T. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event details.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15890 CHEVRON. Mailing Address 1808 E PINHOOK RD. City LAFAYETTE State LA Zip Code 70503. Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:FUEL. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 09/09/2014. Year-To-Date: 479795.61. Summary: FEDERAL SHARE 15.83, NONFEDERAL SHARE 59.57, TOTAL AMOUNT 75.40.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15891 EXXONMOBIL. Mailing Address 5300 ENRON RD. City SHREVEPORT State LA Zip Code 71105. Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:FUEL. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 09/09/2014. Year-To-Date: 479795.61. Summary: FEDERAL SHARE 16.64, NONFEDERAL SHARE 62.58, TOTAL AMOUNT 79.22.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15892 EXXONMOBIL. Mailing Address 5300 ENRON RD. City SHREVEPORT State LA Zip Code 71105. Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:FUEL. Activity or Event Identifier: Administrative. Allocated Activity or Event: Administrative. Date 09/09/2014. Year-To-Date: 479795.61. Summary: FEDERAL SHARE 17.31, NONFEDERAL SHARE 65.10, TOTAL AMOUNT 82.41.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: GOOGLE. Transaction ID: H4.15893. Mailing Address: 1600 AMPHITHEATRE PKWY, MOUNTAINVIEW, CA 94043. Purpose: AMEX CHARGE 9/09/14 - ONLINE ADVERTISING. Activity: Administrative. Date: 09/09/2014. Year-to-date: 479795.61. Summary: FEDERAL SHARE 17.50, NONFEDERAL SHARE 65.83, TOTAL AMOUNT 83.33.

Form B: FOSTER'S FUN SHOP. Transaction ID: H4.15894. Mailing Address: 433 E TERRACE AVE, GILBERT, AZ 85234. Purpose: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES. Activity: Administrative. Date: 09/09/2014. Year-to-date: 479795.61. Summary: FEDERAL SHARE 17.64, NONFEDERAL SHARE 66.35, TOTAL AMOUNT 83.99.

Form C: SHELL. Transaction ID: H4.15895. Mailing Address: 11440 PERKINS ROAD, BATON ROUGE, LA 70810. Purpose: AMEX CHARGE 9/09/14 - TRAVEL:FUEL. Activity: Administrative. Date: 09/09/2014. Year-to-date: 479795.61. Summary: FEDERAL SHARE 17.76, NONFEDERAL SHARE 66.82, TOTAL AMOUNT 84.58.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) PARTY CITY, Transaction ID : H4.15896, Allocated Activity or Event: Administrative, Date: 09/09/2014, Total Amount: 91.66

Form B: Full Name (Last, First, Middle Initial) CANDY APPLE COSTUME, Transaction ID : H4.15897, Allocated Activity or Event: Administrative, Date: 09/09/2014, Total Amount: 94.98

Form C: Full Name (Last, First, Middle Initial) BEST BUY, Transaction ID : H4.15898, Allocated Activity or Event: Administrative, Date: 09/09/2014, Total Amount: 97.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15899
THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE
Mailing Address 1155 F STREET, NW SUITE 400
City WASHINGTON State DC Zip Code 20004
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 479795.61
Date 09 / 09 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
22.66 + 85.25 = 107.91

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15900
SUDDENLINK NATIONAL
Mailing Address 520 MARYVILLE CENTER DR
City ST LOUIS State MO Zip Code 63141
Purpose of Disbursement: AMEX CHARGE 9/09/14 - SECURITY SERVICES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 479795.61
Date 09 / 09 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
23.11 + 86.92 = 110.03

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15901
HILTON HOTEL
Mailing Address 198 E DELWARE PL
City CHICAGO State IL Zip Code 60611
Purpose of Disbursement: AMEX CHARGE 9/09/14 - TRAVEL:LODGING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 479795.61
Date 09 / 09 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
24.93 + 93.78 = 118.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]



**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF LOUISIANA**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15902</b> <b>BATON ROUGE COMMUNICATIONS</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3773 HARDING BLVD		Allocated Activity or Event Year-To-Date 479795.61	
City State Zip Code BATON ROUGE LA 70807	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: AMEX CHARGE 9/09/14 - BROADBAND SERVICES		[MEMO ITEM]	
Activity or Event Identifier: <b>Administrative</b>		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
[MEMO ITEM]		25.20 + 94.79 = 119.99	

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15903</b> <b>DIRECTV</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2230 EAST IMPERIAL HWY		Allocated Activity or Event Year-To-Date 479795.61	
City State Zip Code EL SEGUNDO CA 90245	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: AMEX CHARGE 9/09/14 - UTILITIES		[MEMO ITEM]	
Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
[MEMO ITEM]		28.11 + 105.77 = 133.88	

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15904</b> <b>DILLARD'S</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6601 BLUEBONNET BLVD		Allocated Activity or Event Year-To-Date 479795.61	
City State Zip Code BATON ROUGE LA 70807	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: AMEX CHARGE 9/09/14 - OFFICE SUPPLIES		[MEMO ITEM]	
Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	
[MEMO ITEM]		28.33 + 106.56 = 134.89	

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[ ]	[ ]	[ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: AT&T Transaction ID: H4.15905. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: ENTERPRISE Transaction ID: H4.15907. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: DEANO'S PIZZA Transaction ID: H4.15908. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: ALLBRANDS, Transaction ID: H4.15909. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: CALANDRO'S SUPERMARKET, Transaction ID: H4.15910. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: ENERGY-BILLMATRIX UTILITY, Transaction ID: H4.15911. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (0.00), NONFEDERAL SHARE (0.00), TOTAL AMOUNT (0.00).

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: BEST BUY. Transaction ID: H4.15912. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Summary: FEDERAL SHARE 52.52, NONFEDERAL SHARE 197.59, TOTAL AMOUNT 250.11.

Form B: MARRIOTT. Transaction ID: H4.15913. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Summary: FEDERAL SHARE 58.12, NONFEDERAL SHARE 218.66, TOTAL AMOUNT 276.78.

Form C: HOTELS.COM. Transaction ID: H4.15914. Allocated Activity or Event: Administrative. Date: 09/09/2014. Year-to-Date: 479795.61. Summary: FEDERAL SHARE 61.22, NONFEDERAL SHARE 230.32, TOTAL AMOUNT 291.54.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: HOTEL.COM. Transaction ID: H4.15915. Mailing Address: 5400 LBJ FREEWAY SUITE 500, DALLAS TX 75240. Purpose: AMEX CHARGE 9/09/14 - TRAVEL LODGING. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 479795.61. Date: 09/09/2014. Summary: FEDERAL SHARE 71.26, NONFEDERAL SHARE 268.06, TOTAL AMOUNT 339.32.

Form B: DESIGNER GRAPHICS. Transaction ID: H4.15916. Mailing Address: 12404 FRANKSTON HWY, TYLER TX 75703. Purpose: AMEX CHARGE 9/09/14 - PRINTING & DESIGN SERVICES. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 479795.61. Date: 09/09/2014. Summary: FEDERAL SHARE 90.09, NONFEDERAL SHARE 338.91, TOTAL AMOUNT 429.00.

Form C: AMERICAN EXPRESS. Transaction ID: H4.15918. Mailing Address: 200 VESEY ST, MANHATTAN NY 10080. Purpose: CREDIT CARD PAYMENT - SEE MEMO ENTRIES. Activity: Administrative. Allocated Activity or Event: Administrative. Year-To-Date: 481992.39. Date: 09/11/2014. Summary: FEDERAL SHARE 461.32, NONFEDERAL SHARE 1735.46, TOTAL AMOUNT 2196.78.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 461.32, 1735.46, 2196.78.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15919
REPUBLICAN NATIONAL COMMITTEE
Mailing Address 310 FIRST STREET SE
City WASHINGTON State DC Zip Code 20003
Purpose of Disbursement: AMEX CHARGE 9/11/14 - OFFICE SUPPLIES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/11/2014
FEDERAL SHARE 36.75 NONFEDERAL SHARE 138.25 TOTAL AMOUNT 175.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15942
VISA BUSINESS
Mailing Address P.O. BOX 23078
City COLUMBUS State GA Zip Code 31902
Purpose of Disbursement: MERCHANT FEES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/11/2014
FEDERAL SHARE 592.01 NONFEDERAL SHARE 2227.09 TOTAL AMOUNT 2819.10

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15920
CITY SIGN & TAG
Mailing Address 3725 HIGHWAY 27 S
City SULPHUR State LA Zip Code 70665
Purpose of Disbursement: AMEX CHARGE 9/11/14 - PRINTING & DESIGN SERVICES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/12/2014
FEDERAL SHARE 13.77 NONFEDERAL SHARE 51.78 TOTAL AMOUNT 65.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 592.01, 2227.09, 2819.10

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15921
AMERICAN EXPRESS
Mailing Address 200 VESEY ST
City MANHATTAN State NY Zip Code 10080
Purpose of Disbursement: AMEX CHARGE 9/11/14 - BANK FEES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 484811.49
Date 09 / 12 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
121.29 + 456.29 = 577.58

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15922
GOGOAIR.COM
Mailing Address 1250 NORTH ARLINGTON HEIGHTS SUITE 500
City ITASCA State IL Zip Code 60143
Purpose of Disbursement: AMEX CHARGE 9/11/14 - BROADBAND SERVICES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 484811.49
Date 09 / 13 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
3.14 + 11.81 = 14.95

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15923
VENETIAN/PALAZZO
Mailing Address 3325 LAS VEGAS BLVD
City LAS VEGAS State NV Zip Code 89109
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:LODGING
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 484811.49
Date 09 / 13 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
93.99 + 353.56 = 447.55

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4.15924
HILTON SUITES
Mailing Address 198 E DELWARE PL
City CHICAGO State IL Zip Code 60611
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:LODGING
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/14/2014
FEDERAL SHARE 168.63 + NONFEDERAL SHARE 634.36 = TOTAL AMOUNT 802.99

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4.15925
CHOICE TAXI
Mailing Address 1739 E 73RD PL
City CHICAGO State IL Zip Code 60649
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:GROUND TRANSPORTATION
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/14/2014
FEDERAL SHARE 10.34 + NONFEDERAL SHARE 38.91 = TOTAL AMOUNT 49.25

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4.15926
HOT DOG EXPRES
Mailing Address 4300 N MILWAUKEE AVE
City CHICAGO State IL Zip Code 60641
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:FOOD
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 09/15/2014
FEDERAL SHARE 2.86 + NONFEDERAL SHARE 10.76 = TOTAL AMOUNT 13.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15927
WESTIN MICHIGAN
Mailing Address 909 N MICHIGAN AVE
City CHICAGO State IL Zip Code 60611
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:FOOD
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative Fundraising Exempt
Voter Drive Direct Candidate Support
Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 484811.49
Date 09 / 15 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
0.52 + 1.97 = 2.49

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15929
AMERICAN EXPRESS
Mailing Address 200 VESEY ST
City MANHATTAN State NY Zip Code 10080
Purpose of Disbursement: MERCHANT FEES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
Voter Drive Direct Candidate Support
Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 503992.19
Date 09 / 15 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
4027.95 + 15152.75 = 19180.70

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15943
VISA BUSINESS
Mailing Address P.O. BOX 23078
City COLUMBUS State GA Zip Code 31902
Purpose of Disbursement: MERCHANT FEES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
Voter Drive Direct Candidate Support
Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 511818.20
Date 09 / 15 / 2014
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
1643.46 + 6182.55 = 7826.01

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
5671.41 + 21335.30 = 27006.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**REPUBLICAN PARTY OF LOUISIANA**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15928</b> <b>CHI TAXI</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1739 E 73RD PL		Allocated Activity or Event Year-To-Date 511818.20	
City State Zip Code CHICAGO IL 60649	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: AMEX CHARGE 9/11/14 - TRAVEL:GROUND TRANSPORTATION		Allocated Activity or Event Year-To-Date 511818.20	
Activity or Event Identifier: <b>Administrative</b> [MEMO ITEM]		Date <input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
10.04 + 37.76 = 47.80			

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15932</b> <b>ANEDOT</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10156 PERKINS ROAD SUITE 217F		Allocated Activity or Event Year-To-Date 512003.59	
City State Zip Code BATON ROUGE LA 70810	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: MERCHANT FEES		Allocated Activity or Event Year-To-Date 512003.59	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
38.93 + 146.46 = 185.39			

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15933</b> <b>BITPOLITICS</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 915 N CUTTING		Allocated Activity or Event Year-To-Date 512006.29	
City State Zip Code JENNINGS LA 70546	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: MERCHANT FEES		Allocated Activity or Event Year-To-Date 512006.29	
Activity or Event Identifier: Administrative		Date <input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
0.57 + 2.13 = 2.70			

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.50		148.59		188.09

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15936
IBERIA BANK
Mailing Address 3700 ESSEN LANE
City State Zip Code
BANK FEES
Administrative
Allocated Activity or Event:
Date 09/22/2014
FEDERAL SHARE 0.10 NONFEDERAL SHARE 0.36 TOTAL AMOUNT 0.46

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15937
IBERIA BANK
Mailing Address 3700 ESSEN LANE
City State Zip Code
BANK FEES
Administrative
Allocated Activity or Event:
Date 09/22/2014
FEDERAL SHARE 49.38 NONFEDERAL SHARE 185.75 TOTAL AMOUNT 235.13

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.15876
AT&T
Mailing Address 208 AKARD ST
City State Zip Code
AMEX CHARGE 9/09/14 - UTILITIES
Administrative
[MEMO ITEM]
Allocated Activity or Event:
Date 09/23/2014
FEDERAL SHARE 9.45 NONFEDERAL SHARE 35.55 TOTAL AMOUNT 45.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 49.48, 186.11, 235.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.15934
CIT TECHNOLOGY
Mailing Address PO BOX 550599
City JACKSONVILLE State FL Zip Code 32255
Purpose of Disbursement: EQUIPMENT LEASE: COPIER
Activity or Event Identifier: Administrative
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 512874.97
Date 09 / 23 / 2014
FEDERAL SHARE 132.95 + NONFEDERAL SHARE 500.14 = TOTAL AMOUNT 633.09

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.15917
PAYPAL
Mailing Address 2211 NORTH FIRST STREET
City SAN JOSE State CA Zip Code 95131
Purpose of Disbursement: AMEX CHARGE 9/09/14 - MERCHANT FEES
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: [X] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date 512874.97
Date 09 / 30 / 2014
FEDERAL SHARE 93.45 + NONFEDERAL SHARE 351.55 = TOTAL AMOUNT 445.00

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event: [ ] Administrative [ ] Fundraising [ ] Exempt
[ ] Voter Drive [ ] Direct Candidate Support
[ ] Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
Date
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE 132.95 + NONFEDERAL SHARE 500.14 = TOTAL AMOUNT 633.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE 9677.63 + NONFEDERAL SHARE 36406.30 = TOTAL AMOUNT 46083.93