

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

LANCE HARRIS FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 0.00 | 493705.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 250.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 0.00 | 493455.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 4500.00 | 668785.21 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 4500.00 | 668785.21 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | | |
| | 0.00 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | | |
| | 195568.60 | |

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

LANCE HARRIS FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 0.00 | 442900.00 |
| (ii) Unitemized..... | 0.00 | 8905.00 |
| (iii) TOTAL of contributions from individuals ▶ | 0.00 | 451805.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 41900.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 0.00 | 493705.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 250.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 209200.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 209200.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 0.00 | 703155.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 4500.00 | 668785.21 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 13631.40 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 13631.40 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 250.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 250.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 18131.40 | 669035.21 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 18131.40 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 0.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 18131.40 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 18131.40 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 0.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 12 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
LANCE HARRIS FOR CONGRESS

| | | | | | |
|---|--|------------------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. LR3 CONSULTING LLC | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025 | | |
| Mailing Address 2133 SILVERSIDE DR STE K | | | FEC Identification Number C C00741934 | | |
| City BATON ROUGE | State LA | Zip Code 70808 | Amount of Each Disbursement this Period 4500.00 | | |
| Purpose of Disbursement Consulting Fees | | Category/ Type 001 | Transaction ID : SB17.5463 | | |
| Candidate Name LANCE HARRIS FOR CONGRESS | | Memo Item <input type="checkbox"/> | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: LA District: 05 | | | | | |

| | | | | | |
|--|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) B. | | | Date of Disbursement M M / D D / Y Y Y Y | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | | | | | |
|--|--|-------------------|---|--|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | | |
| Mailing Address | | | FEC Identification Number C | | |
| City | State | Zip Code | Amount of Each Disbursement this Period | | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | | |
| Candidate Name | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | |
| State: District: | | | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 4500.00 |
| TOTAL This Period (last page this line number only).....▶ | 4500.00 |

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

| | | | | |
|---|--------------------------------------|------------------------------------|---|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 6 OF 12 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input checked="" type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b 21 |

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

NAME OF COMMITTEE (In Full)
LANCE HARRIS FOR CONGRESS

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. HARRIS, JOHN LANCE, LANCE, , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025 | |
| Mailing Address 4824 PORTER CIR | | | FEC Identification Number C C00741934 | |
| City ALEXANDRIA | State LA | Zip Code 71303 | Amount of Each Disbursement this Period 1200.00 | |
| Purpose of Disbursement Repayment of Loan | | Category/ Type 009 | Transaction ID : SB19A.5464 | |
| Candidate Name LANCE HARRIS FOR CONGRESS | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: LA District: 05 | | | | |

| | | | | |
|---|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. HARRIS, JOHN LANCE, LANCE, , | | | Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025 | |
| Mailing Address 4824 PORTER CIR | | | FEC Identification Number C C00741934 | |
| City ALEXANDRIA | State LA | Zip Code 71303 | Amount of Each Disbursement this Period 12431.40 | |
| Purpose of Disbursement Repayment of Loan | | Category/ Type 009 | Transaction ID : SB19A.5465 | |
| Candidate Name LANCE HARRIS FOR CONGRESS | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: LA District: 05 | | | | |

| | | | | |
|--|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement M M / D D / Y Y Y Y | |
| Mailing Address | | | FEC Identification Number C | |
| City | State | Zip Code | Amount of Each Disbursement this Period | |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 13631.40 |
| TOTAL This Period (last page this line number only).....▶ | 13631.40 |

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **LANCE HARRIS FOR CONGRESS** Transaction ID : **SC/10.4321**

| | | | |
|--|--|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2020 |
| HARRIS, JOHN LANCE, LANCE, , | | | <input checked="" type="checkbox"/> Primary |
| Mailing Address 4824 PORTER CIR | | | <input type="checkbox"/> General |
| City ALEXANDRIA | | State LA | <input type="checkbox"/> Other (specify) ▼ |
| ZIP Code 71303 | | <input checked="" type="checkbox"/> Personal Funds of the Candidate | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 1200.00 | 1200.00 | 0.00 |

| | | | | |
|--------------|---------------------------------------|-----------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 03 / 12 / 2020 | M M / D D / Y Y Y Y NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: [] |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | [] 0.00 |
| TOTALS This Period (last page in this line only).....▶ | [] |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **LANCE HARRIS FOR CONGRESS** Transaction ID : **SC/10.4894**

| | | | |
|--|--|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2020 |
| HARRIS, JOHN LANCE, LANCE, , | | | <input type="checkbox"/> Primary |
| Mailing Address 4824 PORTER CIR | | | <input checked="" type="checkbox"/> General |
| City ALEXANDRIA | | State LA | ZIP Code 71303 |
| | | | <input type="checkbox"/> Other (specify) ▼ |
| | | <input checked="" type="checkbox"/> Personal Funds of the Candidate | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 13000.00 | 12431.40 | 568.60 |

| | | | | |
|--------------|----------------------------------|----------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | MM / DD / YYYY 10 / 19 / 2020 | MM / DD / YYYY NA | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|--------|
| SUBTOTALS This Period This Page (optional).....▶ | 568.60 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **LANCE HARRIS FOR CONGRESS** Transaction ID : **SC/10.4977**

| | | | |
|--|--|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2020 |
| HARRIS, JOHN LANCE, LANCE, , | | | <input type="checkbox"/> Primary |
| Mailing Address 4824 PORTER CIR | | | <input checked="" type="checkbox"/> General |
| City ALEXANDRIA | | State LA | ZIP Code 71303 |
| | | | <input type="checkbox"/> Other (specify) ▼ |
| | | <input checked="" type="checkbox"/> Personal Funds of the Candidate | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 65000.00 | 0.00 | 65000.00 |

| | | | | |
|--------------|----------------------------------|----------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | MM / DD / YYYY 10 / 22 / 2020 | MM / DD / YYYY NA | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 65000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **LANCE HARRIS FOR CONGRESS** Transaction ID : **SC/10.5072**

| | | |
|---|-------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item HARRIS, JOHN LANCE, LANCE, , | | Election: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____ |
| Mailing Address 4824 PORTER CIR | | <input checked="" type="checkbox"/> Personal Funds of the Candidate |
| City ALEXANDRIA | State LA | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 40000.00 | 0.00 | 40000.00 |

| | | | | |
|--------------|---------------------------------------|---------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 11 / 13 / 2020 | M M / D D / Y Y Y Y NA | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 40000.00 |
| TOTALS This Period (last page in this line only).....▶ | _____ |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **LANCE HARRIS FOR CONGRESS** Transaction ID : **SC/10.5069**

| | | |
|---|-------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item HARRIS, JOHN LANCE, LANCE, , | | Election: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____ |
| Mailing Address 4824 PORTER CIR | | <input checked="" type="checkbox"/> Personal Funds of the Candidate |
| City ALEXANDRIA | State LA | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 90000.00 | 0.00 | 90000.00 |

| | | | | |
|--------------|---------------------------------------|---------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 11 / 18 / 2020 | M M / D D / Y Y Y Y NA | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: _____ |

| | |
|---|-----------|
| SUBTOTALS This Period This Page (optional).....▶ | 90000.00 |
| TOTALS This Period (last page in this line only).....▶ | 195568.60 |

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

LANCE HARRIS FOR CONGRESS

| | | | |
|---|--------------------|--------------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LR3 CONSULTING LLC | | | Nature of Debt (Purpose): CAMPAIGN MANAGEMENT FEES |
| Mailing Address 2133 SILVERSIDE DR STE K | | | |
| City BATON ROUGE | State LA | Zip Code 70808 | |

| | | | |
|---|---|--|--|
| Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="4500.00"/> | | Transaction ID : SD10.5381 | |
| Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/> | Payment This Period <input style="width:100%;" type="text" value="4500.00"/> | Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/> | |

| | | | |
|--|-------|----------|---------------------------|
| 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 style="width:100%;" type="text"/> | | Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/> | |
| Amount Incurred This Period <input style="width:100%;" type="text"/> | Payment This Period <input style="width:100%;" 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 style="width:100%;" type="text"/> | | Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/> | |
| Amount Incurred This Period <input style="width:100%;" type="text"/> | Payment This Period <input style="width:100%;" type="text"/> | | |

| | |
|--|---|
| 1) SUBTOTALS This Period This Page (optional) | <input style="width:100%;" type="text" value="0.00"/> |
| 2) TOTALS This Period (last page this line number only) | <input style="width:100%;" type="text" value="0.00"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | <input style="width:100%;" type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input style="width:100%;" type="text"/> |