

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Charles Boustany JR MD for Congress, INC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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)).....	146705.00	442848.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	13510.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	146705.00	429338.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	51042.23	205316.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	20.00	13679.85
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	51022.23	191636.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	399561.59	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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).....

90850.00

258630.00

(ii) Unitemized.....

3355.00

5218.00

(iii) TOTAL of contributions

94205.00

263848.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

52500.00

179000.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

146705.00

442848.00

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

20.00

13679.85

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

1576.06

5028.94

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

148301.06

461556.79

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	51042.23	205316.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	12510.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	13510.00
21. OTHER DISBURSEMENTS.....	12090.00	38090.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	63132.23	256916.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	314392.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	148301.06
25. SUBTOTAL (add Line 23 and Line 24).....	462693.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	63132.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	399561.59

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

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

Full Name (Last, First, Middle Initial) A. William Goldring		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007
Mailing Address 5101 St. Charles Avenue		Transaction ID: A-C8907
City State Zip Code New Orleans LA 70115	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Magnolia Marketing Company	Occupation Principal	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. David S. Huval		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007
Mailing Address 511 Robert Lee Circle		Transaction ID: A-C8901
City State Zip Code Lafayette LA 70506-3136	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Huval & Associates	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Ann Knight		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007
Mailing Address 106 Shannon Road		Transaction ID: A-C8911
City State Zip Code Lafayette LA 70503-3511	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Knight Oil Tools	Occupation CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. J.T. McQuitty		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007	
Mailing Address 111 Thibodeaux Drive		Transaction ID: A-C8915	
City State Zip Code Lafayette LA 70503-4439	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Self-Employed Occupation Physician	Election Cycle-to-Date ▼ 4600.00		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. J.T. McQuitty		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007	
Mailing Address 111 Thibodeaux Drive		Transaction ID: A-C8916	
City State Zip Code Lafayette LA 70503-4439	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Self-Employed Occupation Physician	Election Cycle-to-Date ▼ 4600.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Rodney L. Savoy		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2007	
Mailing Address 100 Camellia Boulevard		Transaction ID: A-C8908	
City State Zip Code Lafayette LA 70503-4202	Amount of Each Receipt this Period 1900.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer River Ranch Development Co. Occupation Developer	Election Cycle-to-Date ▼ 5000.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Rodney L. Savoy

Mailing Address 100 Camellia Boulevard

City State Zip Code
Lafayette LA 70503-4202

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

Name of Employer
River Ranch Development Co.

Occupation
Developer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2007

Transaction ID: A-C8909

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Rodney L. Savoy

Mailing Address 100 Camellia Boulevard

City State Zip Code
Lafayette LA 70503-4202

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

Name of Employer
River Ranch Development Co.

Occupation
Developer

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

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2007

Transaction ID: A-C8910

Amount of Each Receipt this Period
400.00

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

C. Full Name (Last, First, Middle Initial)
Glenn R. Stewart

Mailing Address 607 West Bayou Parkway

City State Zip Code
Lafayette LA 70503

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

Name of Employer
Self-Employed

Occupation
Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2007

Transaction ID: A-C8913

Amount of Each Receipt this Period
2300.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

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

Mailing Address 607 West Bayou Parkway

City State Zip Code
Lafayette LA 70503

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

Name of Employer Self-Employed
Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2007

Transaction ID: A-C8914

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
J. K. White, M.D.

Mailing Address 3602 Holly Hill Road

City State Zip Code
Lake Charles LA 70605-1323

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

Name of Employer Cardiovascular Specialists of SW LA
Occupation Doctor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2007

Transaction ID: A-C8902

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Eric A. Sanders

Mailing Address 2620 Country Club Road

City State Zip Code
Lake Charles LA 70605

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

Name of Employer Self-Employed
Occupation Pediatric Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 12 / 2007

Transaction ID: A-C8929

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

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

Mailing Address 15150 Undercliff Court

City State Zip Code
Woodbridge VA 22193

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

Name of Employer Occupation
Barbour, Griffith & Rogers Legislative Affairs Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 23 / 2007

Transaction ID: A-C8932

Amount of Each Receipt this Period
250.00

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

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

Mailing Address PO Box 52745

City State Zip Code
Lafayette LA 70505-2745

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

Name of Employer Occupation
Badger Oil Corp. President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2007

Transaction ID: A-C8961

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Gregory J. Logan

Mailing Address 1232 Camellia Boulevard Suite B

City State Zip Code
Lafayette LA 70508

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

Name of Employer Occupation
The Logan Firm Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 26 / 2007

Transaction ID: A-C8951

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2350.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Ralph O. Brennan

Mailing Address 550 Bienville Street

City State Zip Code
New Orleans LA 70130-2207

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

Name of Employer Occupation
Restaurant Group, LLC Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 27 / 2007

Transaction ID: A-C8949

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Mary T. Svendson

Mailing Address 1919 Woodland Drive

City State Zip Code
Baton Rouge LA 70808-1936

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 17 / 2007

Transaction ID: A-C9050

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2829 4th Avenue Suite 150

City State Zip Code
Lake Charles LA 70601-7897

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

Name of Employer Occupation
Inst. for Neuropsychiatry Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9021

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	3800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
David J. Bondy, Jr.

Mailing Address 4450 Woodside Drive

City State Zip Code
Baton Rouge LA 70808-1264

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

Name of Employer SIF Consultants Occupation Chief Executive Officer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 7

Transaction ID: A-C9026

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address PO Box 1013

City State Zip Code
Lake Charles LA 70602-1013

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

Name of Employer Chozen Business Services Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 7

Transaction ID: A-C9022

Amount of Each Receipt this Period
300.00

SEE MEMO TEXT

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

C. Full Name (Last, First, Middle Initial)
David E. Chozen

Mailing Address PO Box 1013

City State Zip Code
Lake Charles LA 70602-1013

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

Name of Employer Chozen Business Services Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 9 / 2 0 0 7

Transaction ID: A-C9125

Amount of Each Receipt this Period
700.00

SEE MEMO TEXT

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. W.G. Courson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 5633 Duncan Kenner Drive		Transaction ID: A-C9028	
City State Zip Code Baton Rouge LA 70820-4418	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lobbyist Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. David Deloach		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 9210 Gail Drive		Transaction ID: A-C9027	
City State Zip Code Baton Rouge LA 70809-3009	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Attorney Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Carlos E. Elkins, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 910 Richland Avenue		Transaction ID: A-C9036	
City State Zip Code Lafayette LA 70508-6619	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Houston Energy Corp. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Engineer Election Cycle-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional) ▶	4300.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Mary Elkins

Mailing Address 910 Richland Avenue

City State Zip Code
Lafayette LA 70508-6619

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9018

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Dan Flavin

Mailing Address 1916 Wilmax Street

City State Zip Code
Lake Charles LA 70605-5216

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

Name of Employer Occupation
Flavin Realty Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9020

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Milton G. Graugnard

Mailing Address 21109 Turkey Creek Drive

City State Zip Code
Baton Rouge LA 70817-8145

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

Name of Employer Occupation
Cajun Construction, Inc. Contractor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9030

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	5600.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. Lane L. Grigsby		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2007	
Mailing Address P.O. Box 104		Transaction ID: A-C9033	
City State Zip Code Baton Rouge LA 70821-0104		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Cajun Construction, Inc. Owner			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Robert C. Henry		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2007	
Mailing Address 501 Beaulieu Drive		Transaction ID: A-C9019	
City State Zip Code Lafayette LA 70508-6723		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self-Employed Engineer			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) C. Pat Manuel		Date of Receipt M M / D D / Y Y Y Y Y 08 / 29 / 2007	
Mailing Address PO Box 1046		Transaction ID: A-C9023	
City State Zip Code Eunice LA 70535-1046		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Retired Retired			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional) ▶	5600.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) Pat Manuel		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address PO Box 1046		Transaction ID: A-C9037	
City State Zip Code Eunice LA 70535-1046		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4600.00	

B. Full Name (Last, First, Middle Initial) James Nickel		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 308 Cornell Avenue		Transaction ID: A-C9029	
City State Zip Code Baton Rouge LA 70808-4608		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Courson Nickel		Occupation Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) John R. Schempf		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7	
Mailing Address 11006 North Shoreline Avenue		Transaction ID: A-C9035	
City State Zip Code Baton Rouge LA 70809-9012		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer The Newtron Group		Occupation General Counsel	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	3050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Jorge L. Tarajano

Mailing Address 6841 Fountain Lane

City State Zip Code
Baton Rouge LA 70809-1046

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

Name of Employer Occupation
Para Group Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9034

Amount of Each Receipt this Period
750.00

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

B. Full Name (Last, First, Middle Initial)
Robert F. Tarp

Mailing Address 401 North College Road Suite 6

City State Zip Code
Lafayette LA 70506-4263

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

Name of Employer Occupation
Self-Employed Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 29 / 2007

Transaction ID: A-C9039

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Laura Edwards

Mailing Address 124 Acacia Drive

City State Zip Code
Lafayette LA 70508-4002

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

Name of Employer Occupation
Private School Development Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9057

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. Darcy N. Logan		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2007	
Mailing Address P.O. Box 52704		Transaction ID: A-C9063	
City State Zip Code Lafayette LA 70505-2704		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

Full Name (Last, First, Middle Initial) B. Darcy N. Logan		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2007	
Mailing Address P.O. Box 52704		Transaction ID: A-C9067	
City State Zip Code Lafayette LA 70505-2704		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

Full Name (Last, First, Middle Initial) C. Gregory J. Logan		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2007	
Mailing Address 1232 Camellia Boulevard Suite B		Transaction ID: A-C9066	
City State Zip Code Lafayette LA 70508		Amount of Each Receipt this Period 2200.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer The Logan Firm	Occupation Attorney		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00		

SUBTOTAL of Receipts This Page (optional) ▶	6800.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Gregory J. Logan

Mailing Address 1232 Camellia Boulevard
Suite B

City State Zip Code
Lafayette LA 70508

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

Name of Employer Occupation
The Logan Firm Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9068

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Lee Mallett

Mailing Address P.O. Box 16195

City State Zip Code
Lake Charles LA 70616-6195

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

Name of Employer Occupation
Mallett, Inc. Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9061

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Lee Mallett

Mailing Address P.O. Box 16195

City State Zip Code
Lake Charles LA 70616-6195

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

Name of Employer Occupation
Mallett, Inc. Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9064

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	6900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

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

Mailing Address P.O. Box 2059

City State Zip Code
Sulphur LA 70664-2059

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

Name of Employer Occupation
Pumpelly Oil Company, LLC Chief Executive Officer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9060

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Linda L. Rispone

Mailing Address 18260 S. Mission Hills Avenue

City State Zip Code
Baton Rouge LA 70810-7974

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9059

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 101 Cove Circle

City State Zip Code
Lafayette LA 70508-4055

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

Name of Employer Occupation
Marlin Energy, LLC President/CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2007

Transaction ID: A-C9062

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. Sheila M. Zepernick		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2007	
Mailing Address 101 Cove Circle		Transaction ID: A-C9065	
City State Zip Code Lafayette LA 70508-4055	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Homemaker Homemaker	Election Cycle-to-Date 2300.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Terry Backhaus		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2007	
Mailing Address PO Box 1107		Transaction ID: A-C9078	
City State Zip Code Lake Charles LA 70602-1107	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Lincoln Financial Advisors Investment Advisor Representative	Election Cycle-to-Date 2300.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Ed Domingues		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2007	
Mailing Address 500 N Kibbe Street		Transaction ID: A-C9091	
City State Zip Code Erath LA 70533-3409	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Fluid Crane and Construction Owner	Election Cycle-to-Date 2300.00		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	6900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 73 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Charles Boustany JR MD for Congress, INC

Full Name (Last, First, Middle Initial) A. Rickey Domingues Mailing Address 500 N Kibbe Street City State Zip Code Erath LA 70533-3409 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A-C9093 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">2300.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	7												
Name of Employer Retired Occupation Retired Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div style="border: 1px solid black; padding: 5px; text-align: right;">2300.00</div>																				

Full Name (Last, First, Middle Initial) B. Francine E. Friedman Mailing Address 922 S. Rolfe Street City State Zip Code Arlington VA 22204 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A-C9090 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">250.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	7												
Name of Employer Hunton & Williams Occupation Attorney Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div style="border: 1px solid black; padding: 5px; text-align: right;">310.00</div>																				

Full Name (Last, First, Middle Initial) C. Eric C. Apfelbach Mailing Address 5804 Ivanhoe Circle City State Zip Code Fitchburg WI 53711-6402 FEC ID number of contributing federal political committee. C	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A-C9118 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">250.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	0	7												
Name of Employer Information Requested Occupation Information Requested Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div style="border: 1px solid black; padding: 5px; text-align: right;">250.00</div>																				

SUBTOTAL of Receipts This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;">2800.00</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;"> </div>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

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

A. Full Name (Last, First, Middle Initial)
David M. Barron

Mailing Address 11109 Flora Lee Drive

City State Zip Code
Fairfax Station VA 22039-1029

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

Name of Employer Occupation
Adams & Reese, LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9106

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Bob R. Brooks, Jr.

Mailing Address 1107 N. Pitt Street
Apartment 2C

City State Zip Code
Alexandria VA 22314-1462

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

Name of Employer Occupation
Alpine Group Government Relations Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9107

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Leonard Franques

Mailing Address 1811 Roper Drive

City State Zip Code
Scott LA 70583-4719

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

Name of Employer Occupation
America's Pizzá Co. Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9122

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	3550.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Michelle Franques

Mailing Address 1811 Roper Drive

City State Zip Code
Scott LA 70583-4719

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9119

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Charles T. Goodson

Mailing Address 400 E Kaliste Saloom Road
Suite 6000

City State Zip Code
Lafayette LA 70508-8523

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

Name of Employer Occupation
PetroQuest Energy, Inc. Chairman / CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9120

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Jeanne W. Goodson

Mailing Address 304 Oakwood Drive

City State Zip Code
Lafayette LA 70503-4429

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007

Transaction ID: A-C9123

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	▶	6900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. John E. Soileau		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address PO Box 1087		Transaction ID: A-C9117	
City State Zip Code Eunice LA 70535-1087		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Sunland Construction Manager		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) B. John E. Soileau		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address PO Box 1087		Transaction ID: A-C9121	
City State Zip Code Eunice LA 70535-1087		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Sunland Construction Manager		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) C. Jean R. Abinader		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2007	
Mailing Address 5603 Chesterbrook Road		Transaction ID: A-C9130	
City State Zip Code Bethesda MD 20816-1301		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Moroccan American Managing Director		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	4050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

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

A. Full Name (Last, First, Middle Initial)
Rhod M. Shaw

Mailing Address 230 W Windsor Avenue

City State Zip Code
Alexandria VA 22301-1518

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

Name of Employer Occupation
The Alpine Group Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: A-C9128

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Andrew S. Wright

Mailing Address PO Box 2584

City State Zip Code
Alexandria VA 22301-0584

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

Name of Employer Occupation
Dutko Worldwide Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2007

Transaction ID: A-C9129

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	90850.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. Independent Community Bankers PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2007
Mailing Address 1 Thomas Circle NW Suite 400		Transaction ID: A-C8920
City State Zip Code Washington DC 20005-5807	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00032698	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 3500.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Koch Industries Inc. PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2007
Mailing Address 655 15th Street NW Suite 445		Transaction ID: A-C8917
City State Zip Code Washington DC 20005-5727	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00236489	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 6000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. National Beer Wholesalers Association PAC		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2007
Mailing Address 1101 King Street Suite 600		Transaction ID: A-C8919
City State Zip Code Alexandria VA 22314-2965	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00144766	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. Wine and Spirits Wholesalers of America (WSWA PAC)		Date of Receipt MM / DD / YYYY 07 / 11 / 2007
Mailing Address 805 15th Street NW Suite 430		Transaction ID: A-C8918
City Washington State DC Zip Code 20005-2273	FEC ID number of contributing federal political committee. C C00147173	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	1000.00	

Full Name (Last, First, Middle Initial) B. Securities Industry and Financial Markets Association (SIFMAPAC)		Date of Receipt MM / DD / YYYY 07 / 23 / 2007
Mailing Address 1425 K Street NW Floor 7		Transaction ID: A-C8933
City Washington State DC Zip Code 20005-3684	FEC ID number of contributing federal political committee. C C00431312	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	1000.00	

Full Name (Last, First, Middle Initial) C. The Freedom Project		Date of Receipt MM / DD / YYYY 07 / 23 / 2007
Mailing Address 111 C Street SE		Transaction ID: A-C8934
City Washington State DC Zip Code 20003-1832	FEC ID number of contributing federal political committee. C C00305805	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Election Cycle-to-Date ▼	5000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 28 / 73
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
National Association of Spine Specialists (SPINE PAC)
 Mailing Address 6300 N River Road
Suite 500
 City State Zip Code
Rosemont IL 60018-4235
 FEC ID number of contributing federal political committee. **C** C00349225
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 26 / 2007
Transaction ID: A-C8960
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Association of Convenience Stores (NACS PAC)
 Mailing Address 1600 Duke Street
 City State Zip Code
Alexandria VA 22314-3466
 FEC ID number of contributing federal political committee. **C** C00126763
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 27 / 2007
Transaction ID: A-C8948
 Amount of Each Receipt this Period
 1500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
USA Rice Federation PAC
 Mailing Address 4301 Fairfax Drive
Suite 305
 City State Zip Code
Arlington VA 22203-1633
 FEC ID number of contributing federal political committee. **C** C00308478
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 27 / 2007
Transaction ID: A-C8947
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. IRL PAC		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007	
Mailing Address PO Box 10460		Transaction ID: A-C8972	
City State Zip Code Burke VA 22009-0460		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00402982		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mario Diaz-Balart for Congress		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007	
Mailing Address 9760 SW 118th Street		Transaction ID: A-C8970	
City State Zip Code Miami FL 33176-4133		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00376087		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Mario Diaz-Balart for Congress		Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007	
Mailing Address 9760 SW 118th Street		Transaction ID: A-C9124	
City State Zip Code Miami FL 33176-4133		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00376087		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 30 / 73
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association PAC (NATCA PAC)
Mailing Address 1325 Massachusetts Avenue NW
City Washington State DC Zip Code 20005-4171
FEC ID number of contributing federal political committee. **C** C00238725
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7
Transaction ID: A-C8973
Amount of Each Receipt this Period
2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ros-Lehtinen for Congress
Mailing Address PO Box 522784
City Miami State FL Zip Code 33152-2784
FEC ID number of contributing federal political committee. **C** C00280537
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 7
Transaction ID: A-C8971
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Air Traffic Controllers Association PAC (NATCA PAC)
Mailing Address 1325 Massachusetts Avenue NW
City Washington State DC Zip Code 20005-4171
FEC ID number of contributing federal political committee. **C** C00238725
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 7
Transaction ID: A-C9056
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 31 / 73
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Action Committee for Rural Electrification
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Wilson Boulevard
 City Arlington State VA Zip Code 22203-1867
 FEC ID number of contributing federal political committee. **C** C00002972
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 0 / 2 0 0 7
Transaction ID: A-C9044
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. American Chemistry Council PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 Wilson Boulevard
 City Arlington State VA Zip Code 22209-2323
 FEC ID number of contributing federal political committee. **C** C00252338
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 0 / 2 0 0 7
Transaction ID: A-C9046
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. American Dental PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 14th Street NW Suite 1100
 City Washington State DC Zip Code 20005-5627
 FEC ID number of contributing federal political committee. **C** C00000729
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 2 0 / 2 0 0 7
Transaction ID: A-C9042
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 32 / 73
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
California Dairies Federal PAC

Mailing Address P.O. Box 2198

City State Zip Code
Los Banos CA 93635-2198

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2007

Transaction ID: A-C9047

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 1101 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20004-2514

FEC ID number of contributing federal political committee. **C** C00039305

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2007

Transaction ID: A-C9045

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Jones, Walker, Waechter, Poitevent Carrere & Denegre PAC

Mailing Address 201 Saint Charles Avenue
Floor 49

City State Zip Code
New Orleans LA 70170-1000

FEC ID number of contributing federal political committee. **C** C00111534

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2007

Transaction ID: A-C9049

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 73
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
National Association of Health Underwriters PAC

Mailing Address 2000 14th Street N
Suite 450

City Arlington State VA Zip Code 22201-2573

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: A-C9043

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
National Court Reporters Association PAC

Mailing Address 8224 Old Courthouse Road

City Vienna State VA Zip Code 22182-3808

FEC ID number of contributing federal political committee. **C** C00146506

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: A-C9041

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1120 G Street NW
Suite 900

City Washington State DC Zip Code 20005-3801

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2007

Transaction ID: A-C9048

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 73
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. Democracy Believers PAC		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 7
Mailing Address 1155 21st Street, NW Suite 300		Transaction ID: A-C9038
City Washington State DC Zip Code 20036-3312	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00382036		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Associated General Contractors of America PAC (AGC PAC)		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address 2300 Wilson Boulevard Suite 400		Transaction ID: A-C9081
City Arlington State VA Zip Code 22201-5426	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00082917		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. National Association of Realtors PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address 430 N Michigan Avenue		Transaction ID: A-C9080
City Chicago State IL Zip Code 60611-4011	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00030718		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

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

Mailing Address PO Box 6016

City San Ramon State CA Zip Code 94583-0716

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2007

Transaction ID: A-C9094

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address P.O. Box 64089

City Saint Paul State MN Zip Code 55164-0089

FEC ID number of contributing federal political committee. **C** C00149104

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2007

Transaction ID: A-C9095

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
NFIB Safe Trust

Mailing Address 1201 F Street NW Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2007

Transaction ID: A-C9096

Amount of Each Receipt this Period
1000.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 73
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A. American Trucking Association (TRUCK PAC)
Full Name (Last, First, Middle Initial)
Mailing Address 430 1st Street, SE
City Washington State DC Zip Code 20003-1826
FEC ID number of contributing federal political committee. **C** C00002881
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007
Transaction ID: A-C9113
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Federal Express PAC
Full Name (Last, First, Middle Initial)
Mailing Address 942 S. Shady Grove Road
City Memphis State TN Zip Code 38120-4117
FEC ID number of contributing federal political committee. **C** C00068692
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007
Transaction ID: A-C9112
Amount of Each Receipt this Period
5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. National Restaurant Association PAC
Full Name (Last, First, Middle Initial)
Mailing Address 1200 17th Street NW
City Washington State DC Zip Code 20036-3006
FEC ID number of contributing federal political committee. **C** C00003764
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2007
Transaction ID: A-C9108
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 73
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) A. Society for Vascular Surgery PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 633 N Saint Clair Street Floor 24		Transaction ID: A-C9109	
City State Zip Code Chicago IL 60611-6554		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00381459		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. US Rice Producers PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 2900 Wilcrest Drive Suite 180		Transaction ID: A-C9111	
City State Zip Code Houston TX 77042-3551		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00383661		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Wal-Mart Stores Inc. PAC for Responsible Government		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 702 SW 8th Street		Transaction ID: A-C9110	
City State Zip Code Bentonville AR 72716-6209		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00093054		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. Zeneca, Inc. (AZ PAC)		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 1800 Concord Pike P.O. Box 15438		Transaction ID: A-C9114	
City State Zip Code Wilmington DE 19850		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00279455		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Arch Chemicals Inc. Government Participation Fund		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2007	
Mailing Address 501 Merritt Seven		Transaction ID: A-C9134	
City State Zip Code Norwalk CT 6856-		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00345926		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Hornbeck Offshore Services PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2007	
Mailing Address 103 Northpark Boulevard Suite 300		Transaction ID: A-C9131	
City State Zip Code Covington LA 70433		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00424366		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 73
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Koch Industries Inc. PAC

Mailing Address 655 15th Street NW
Suite 445

City Washington State DC Zip Code 20005-5727

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2007

Transaction ID: A-C9132

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
National Thoroughbred Racing Association PAC

Mailing Address 2525 Harrodsburg Road

City Lexington State KY Zip Code 40504-3355

FEC ID number of contributing federal political committee. **C** C00360008

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2007

Transaction ID: A-C9133

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	52500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 73
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) A. Iberia Bank		Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2007
Mailing Address 200 W Congress Street		Transaction ID: A-M8940
City State Zip Code Lafayette LA 70501-6873	Amount of Each Receipt this Period 441.30	
FEC ID number of contributing federal political committee. C	Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 4705.56		

Full Name (Last, First, Middle Initial) B. Iberia Bank		Date of Receipt M M / D D / Y Y Y Y Y 08 / 16 / 2007
Mailing Address 200 W Congress Street		Transaction ID: A-M8982
City State Zip Code Lafayette LA 70501-6873	Amount of Each Receipt this Period 535.29	
FEC ID number of contributing federal political committee. C	Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 4705.56		

Full Name (Last, First, Middle Initial) C. Iberia Bank		Date of Receipt M M / D D / Y Y Y Y Y 09 / 17 / 2007
Mailing Address 200 W Congress Street		Transaction ID: A-M9085
City State Zip Code Lafayette LA 70501-6873	Amount of Each Receipt this Period 276.09	
FEC ID number of contributing federal political committee. C	Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 4705.56		

SUBTOTAL of Receipts This Page (optional) ▶	1252.68
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 73	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial)
Wachovia Bank, N.A.

Mailing Address 7901 Wisconsin Avenue
MD1010

City	State	Zip Code
Bethesda	MD	20814-3619

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

Name of Employer	Occupation
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 323.38

Date of Receipt
MM / DD / YYYY
09 / 24 / 2007

Transaction ID: A-M9083

Amount of Each Receipt this Period
323.38

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

SUBTOTAL of Receipts This Page (optional)	▶	323.38
TOTAL This Period (last page this line number only)	▶	1576.06

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Iberia Bank		Transaction ID: B-E-8939 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 7
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Bank Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Cingular Wireless		Transaction ID: B-E-8824 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 636.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Carol Stream State IL Zip Code 60197-6463	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Talent PayMaster, Inc.		Transaction ID: B-E-8827 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 7
Mailing Address 7315 Wisconsin Avenue		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Bethesda State MD Zip Code 20814-3202	Purpose of Disbursement Bookkeeping Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3146.85
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Political Firm LLC		Transaction ID: B-E-8826 Date of Disbursement 07 / 03 / 2007
Mailing Address 7646 Old Hammond Highway		Amount of Each Disbursement this Period 1500.00
City Baton Rouge State LA Zip Code 70809-1221	Purpose of Disbursement GOTV Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Total HR Solutions LLC		Transaction ID: B-E-8945 Date of Disbursement 07 / 05 / 2007
Mailing Address 102 Versailles Boulevard Suite 314		Amount of Each Disbursement this Period 338.66
City Lafayette State LA Zip Code 70501-6703	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8943 Date of Disbursement 07 / 11 / 2007
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 228.79
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Bank Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	2067.45
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Marilyn Lee		Transaction ID: B-E-8942 Date of Disbursement 07 / 12 / 2007	
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1186.28	
City Lafayette State LA Zip Code 70506-3334	Purpose of Disbursement Payroll Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) B. Iberia Bank		Transaction ID: B-E-8937 Date of Disbursement 07 / 13 / 2007	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 30.00	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Bank Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8938 Date of Disbursement 07 / 16 / 2007	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 10.00	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Bank Fee Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

SUBTOTAL of Disbursements This Page (optional)	1226.28
TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Transaction ID: B-S-713 Date of Disbursement 07 / 18 / 2007
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 126.56
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Transaction ID: B-S-725 Date of Disbursement 07 / 18 / 2007
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 249.23
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)

Full Name (Last, First, Middle Initial) C. Circle K		Transaction ID: B-S-726 Date of Disbursement 07 / 18 / 2007
Mailing Address 615 W University Avenue		Amount of Each Disbursement this Period 50.00
City Lafayette State LA Zip Code 70506-3541	Purpose of Disbursement Fuel Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Complete Campaigns Full Name (Last, First, Middle Initial) Mailing Address 610 Gateway Center Way Suite K City San Diego State CA Zip Code 92102-4548 Purpose of Disbursement Software Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: B-E-8925 Date of Disbursement: 07 / 18 / 2007 Amount of Each Disbursement this Period: 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: B-S-718 Date of Disbursement: 07 / 18 / 2007 Amount of Each Disbursement this Period: 20.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
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C. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: B-S-720 Date of Disbursement: 07 / 18 / 2007 Amount of Each Disbursement this Period: 23.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
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SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: B-S-721 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 23.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001

B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: B-S-722 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 20.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001

C. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: B-S-723 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 19.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-724 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 23.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
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B. Restaurant August Full Name (Last, First, Middle Initial) Mailing Address 301 Tchoupitoulas Street City New Orleans State LA Zip Code 70130 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-717 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 1737.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(07-18/07)
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C. The Levatino Group Full Name (Last, First, Middle Initial) Mailing Address 2501 Wisconsin Avenue NW Apt. 304 City Washington State DC Zip Code 20007-4543 Purpose of Disbursement SEE MEMO ITEMS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-E-8924 Date of Disbursement 07 / 18 / 2007 Amount of Each Disbursement this Period 2501.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ▶	2501.35
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Levatino Group		Transaction ID: B-S-727 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Candidate Name	003 Category/Type	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. The Levatino Group		Transaction ID: B-S-728 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 185.00
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Transportation & Express Mail Candidate Name	003 Category/Type	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. The Levatino Group		Transaction ID: B-S-729 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 202.03
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Transportation & Decorations Candidate Name	003 Category/Type	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Levatino Group		Transaction ID: B-S-730 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 18.00
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Transportation Candidate Name	Category/Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Levatino Group		Transaction ID: B-S-731 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 779.87
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering & Transportation Candidate Name	Category/Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Levatino Group		Transaction ID: B-S-732 Date of Disbursement 07 / 18 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 316.45
City Washington State DC Zip Code 20007-4543	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering Candidate Name	Category/Type 003	[MEMO ITEM] Subitemization of The Levatino Group(07/18/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Political Firm LLC		Transaction ID: B-E-8923 Date of Disbursement 07 / 18 / 2007
Mailing Address 7646 Old Hammond Highway		Amount of Each Disbursement this Period 1500.00
City Baton Rouge State LA Zip Code 70809-1221	Purpose of Disbursement GOTV Consulting Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Total HR Solutions LLC		Transaction ID: B-E-8936 Date of Disbursement 07 / 18 / 2007
Mailing Address 102 Versailles Boulevard Suite 314		Amount of Each Disbursement this Period 338.66
City Lafayette State LA Zip Code 70501-6703	Purpose of Disbursement Payroll Taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Uncle Bob's Self Storage		Transaction ID: B-S-719 Date of Disbursement 07 / 18 / 2007
Mailing Address 2207 W Pinhook Road		Amount of Each Disbursement this Period 85.95
City Lafayette State LA Zip Code 70508-3231	Purpose of Disbursement Storage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
Subitemization of Visa(07-18/07)

SUBTOTAL of Disbursements This Page (optional) ▶	1838.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Visa</p> <p>Full Name (Last, First, Middle Initial) Mailing Address PO Box 8710</p> <p>City Little Rock State AR Zip Code 72217-8710</p> <p>Purpose of Disbursement SEE MEMO ITEMS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: B-E-8921</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2529.11"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>

<p>B. Marilyn Lee</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1228 Myrtle Place</p> <p>City Lafayette State LA Zip Code 70506-3334</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: B-E-8941</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2777.65"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>

<p>C. Iberia Bank</p> <p>Full Name (Last, First, Middle Initial) Mailing Address 200 W Congress Street</p> <p>City Lafayette State LA Zip Code 70501-6873</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: B-E-8984</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.95"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p> <p><input type="text" value="001"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5311.71"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. State of Louisiana		Transaction ID: B-E-8985 Date of Disbursement 08 / 01 / 2007
Mailing Address PO Box 66788		Amount of Each Disbursement this Period 288.00
City Baton Rouge State LA Zip Code 70896-6788	Purpose of Disbursement State Taxes Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) B. Total HR Solutions LLC		
Mailing Address 102 Versailles Boulevard Suite 314		Transaction ID: B-E-8987 Date of Disbursement 08 / 03 / 2007
City Lafayette State LA Zip Code 70501-6703		Amount of Each Disbursement this Period 1096.02
Purpose of Disbursement Payroll Taxes Candidate Name Category/Type: 001	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Full Name (Last, First, Middle Initial) C. Huckaby, Davis, & Lisker		
Mailing Address 228 S Washington Street Suite 115		Transaction ID: B-E-8964 Date of Disbursement 08 / 07 / 2007
City Alexandria State VA Zip Code 22314-5404		Amount of Each Disbursement this Period 312.50
Purpose of Disbursement Compliance Consulting Candidate Name Category/Type: 001	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1696.52

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. McNeese State University		Transaction ID: B-E-8963 Date of Disbursement 08 / 07 / 2007
Mailing Address Sports Information Office PO Box 92735		Amount of Each Disbursement this Period 275.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lake Charles State LA Zip Code 70609	004 Category/Type	
Purpose of Disbursement Advertising Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Marilyn Lee		Transaction ID: B-E-8988 Date of Disbursement 08 / 14 / 2007
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1186.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70506-3334	001 Category/Type	
Purpose of Disbursement Payroll Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Cingular Wireless		Transaction ID: B-E-8965 Date of Disbursement 08 / 16 / 2007
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 83.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Carol Stream State IL Zip Code 60197-6463	001 Category/Type	
Purpose of Disbursement Cellular Phone Service Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1544.89
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: B-E-8967 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 525.00
City San Diego State CA Zip Code 92102-4548	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Software Service Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Iberia Bank		Transaction ID: B-E-8981 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 15.00
City Lafayette State LA Zip Code 70501-6873	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Fee Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8983 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 10.00
City Lafayette State LA Zip Code 70501-6873	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Fee Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Talent PayMaster, Inc.		Transaction ID: B-E-8966	
Mailing Address 7315 Wisconsin Avenue		Date of Disbursement 08 / 16 / 2007	
City Bethesda	State MD	Zip Code 20814-3202	Amount of Each Disbursement this Period 1250.00
Purpose of Disbursement Bookkeeping Consulting	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		Category/Type 001	

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Transaction ID: B-S-739	
Mailing Address 300 1st Street SE		Date of Disbursement 08 / 17 / 2007	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 139.54
Purpose of Disbursement Meal Expenses	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		Category/Type 001	

[MEMO ITEM]
Subitemization of Visa(08-17/07)

Full Name (Last, First, Middle Initial) C. Federal Express		Transaction ID: B-S-733	
Mailing Address PO Box 1140		Date of Disbursement 08 / 17 / 2007	
City Memphis	State TN	Zip Code 38101-1140	Amount of Each Disbursement this Period 23.10
Purpose of Disbursement Express Mail	Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		Category/Type 001	

[MEMO ITEM]
Subitemization of Visa(08-17/07)

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-734 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 33.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(08-17/07)
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-735 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 20.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(08-17/07)
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C. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-736 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 33.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa(08-17/07)
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Political Firm LLC		Transaction ID: B-E-8969 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7
Mailing Address 7646 Old Hammond Highway		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Baton Rouge State LA Zip Code 70809-1221	Purpose of Disbursement GOTV Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Townhouse Restaurant & Caterer		Transaction ID: B-S-738 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7
Mailing Address 111 Auditorium Place		Amount of Each Disbursement this Period 202.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70503-2801	Purpose of Disbursement Catering Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Visa(08-17/07)

Full Name (Last, First, Middle Initial) C. Uncle Bob's Self Storage		Transaction ID: B-S-737 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7
Mailing Address 2207 W Pinhook Road		Amount of Each Disbursement this Period 60.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70508-3231	Purpose of Disbursement Storage Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Visa(08-17/07)

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Visa Full Name (Last, First, Middle Initial) Mailing Address PO Box 8710 City Little Rock State AR Zip Code 72217-8710 Purpose of Disbursement SEE MEMO ITEMS Candidate Name		Transaction ID: B-E-8968 Date of Disbursement 08 / 17 / 2007 Amount of Each Disbursement this Period 522.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

B. Total HR Solutions LLC Full Name (Last, First, Middle Initial) Mailing Address 102 Versailles Boulevard Suite 314 City Lafayette State LA Zip Code 70501-6703 Purpose of Disbursement Payroll Taxes Candidate Name		Transaction ID: B-E-8990 Date of Disbursement 08 / 22 / 2007 Amount of Each Disbursement this Period 338.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

C. Fezzo's Seafood, Steakhouse & Oyster Bar Full Name (Last, First, Middle Initial) Mailing Address PO Box 1738 City Scott State LA Zip Code 70583-1738 Purpose of Disbursement Catering Candidate Name		Transaction ID: B-E-8977 Date of Disbursement 08 / 29 / 2007 Amount of Each Disbursement this Period 378.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	1238.95
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 73

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

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

Full Name (Last, First, Middle Initial) A. The Camelot Club		Transaction ID: B-E-8978 Date of Disbursement 08 / 29 / 2007
Mailing Address 451 Florida Street 21st Floor		Amount of Each Disbursement this Period 242.33
City Baton Rouge State LA Zip Code 70801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Marilyn Lee		Transaction ID: B-E-8991 Date of Disbursement 08 / 30 / 2007
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1186.28
City Lafayette State LA Zip Code 70506-3334	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Payroll Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-8992 Date of Disbursement 08 / 31 / 2007
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 4.95
City Lafayette State LA Zip Code 70501-6873	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bank Fee Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1433.56
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Transaction ID: B-E-8993 Date of Disbursement 09 / 05 / 2007
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 170.78
City Carol Stream State IL Zip Code 60197-6463	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. The Levatino Group		Transaction ID: B-E-8994 Date of Disbursement 09 / 05 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 15997.60
City Washington State DC Zip Code 20007-4543	Purpose of Disbursement SEE MEMO ITEMS Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. The Levatino Group		Transaction ID: B-S-741 Date of Disbursement 09 / 05 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20007-4543	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of The Levatino Group(09/05/07)

SUBTOTAL of Disbursements This Page (optional) ▶	16168.38
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. The Levatino Group		Transaction ID: B-S-742 Date of Disbursement 09 / 05 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 13058.00
City Washington State DC Zip Code 20007-4543	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of The Levatino Group(09/05/07)

Full Name (Last, First, Middle Initial) B. The Levatino Group		Transaction ID: B-S-743 Date of Disbursement 09 / 05 / 2007
Mailing Address 2501 Wisconsin Avenue NW Apt. 304		Amount of Each Disbursement this Period 939.60
City Washington State DC Zip Code 20007-4543	Purpose of Disbursement Catering & Transportation Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of The Levatino Group(09/05/07)

Full Name (Last, First, Middle Initial) C. Total HR Solutions LLC		Transaction ID: B-E-9104 Date of Disbursement 09 / 05 / 2007
Mailing Address 102 Versailles Boulevard Suite 314		Amount of Each Disbursement this Period 338.66
City Lafayette State LA Zip Code 70501-6703	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	338.66
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Complete Campaigns		Transaction ID: B-E-9069 Date of Disbursement 09 / 10 / 2007
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 450.00
City San Diego State CA Zip Code 92102-4548	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Software Service Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Talent PayMaster, Inc.		Transaction ID: B-E-9075 Date of Disbursement 09 / 10 / 2007
Mailing Address 7315 Wisconsin Avenue		Amount of Each Disbursement this Period 1250.00
City Bethesda State MD Zip Code 20814-3202	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Bookkeeping Consulting Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. The Political Firm LLC		Transaction ID: B-E-9072 Date of Disbursement 09 / 10 / 2007
Mailing Address 7646 Old Hammond Highway		Amount of Each Disbursement this Period 1500.00
City Baton Rouge State LA Zip Code 70809-1221	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GOTV Consulting Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3200.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Marilyn Lee		Transaction ID: B-E-9074 Date of Disbursement 09 / 10 / 2007	
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 205.06	
City Lafayette State LA Zip Code 70506-3334	Purpose of Disbursement Reimbursement- Mileage Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) B. Marilyn Lee		Transaction ID: B-E-9103 Date of Disbursement 09 / 13 / 2007	
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1186.30	
City Lafayette State LA Zip Code 70506-3334	Purpose of Disbursement Payroll Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	

Full Name (Last, First, Middle Initial) C. Catahoula's		Transaction ID: B-S-750 Date of Disbursement 09 / 14 / 2007	
Mailing Address 1211 W Pinhook Road		Amount of Each Disbursement this Period 306.44	
City Lafayette State LA Zip Code 70503-2604	Purpose of Disbursement Catering Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa Bu- siness(09/14/07)	

SUBTOTAL of Disbursements This Page (optional) ▶	1391.36
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-749 Date of Disbursement 09 / 14 / 2007 Amount of Each Disbursement this Period 53.98 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa Business(09/14/07)
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B. Federal Express Full Name (Last, First, Middle Initial) Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Express Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-759 Date of Disbursement 09 / 14 / 2007 Amount of Each Disbursement this Period 53.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa Business(09/14/07)
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C. Lowrys Printing & Copying Full Name (Last, First, Middle Initial) Mailing Address 2004 W Pinhook Road City Lafayette State LA Zip Code 70508-3228 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: B-S-747 Date of Disbursement 09 / 14 / 2007 Amount of Each Disbursement this Period 202.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] Subitemization of Visa Business(09/14/07)
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SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Lowrys Printing & Copying		Transaction ID: B-S-758 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2007
Mailing Address 2004 W Pinhook Road		Amount of Each Disbursement this Period 226.66
City Lafayette State LA Zip Code 70508-3228	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Printing Candidate Name	Category/Type 001	[MEMO ITEM] Subitemization of Visa Business(09/14/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Mazen's		Transaction ID: B-S-752 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2007
Mailing Address 217 W College Street		Amount of Each Disbursement this Period 644.10
City Lake Charles State LA Zip Code 70605-1625	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Catering Candidate Name	Category/Type 003	[MEMO ITEM] Subitemization of Visa Business(09/14/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: B-S-751 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2007
Mailing Address 2670 Johnston Street		Amount of Each Disbursement this Period 32.03
City Lafayette State LA Zip Code 70503-3240	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement General Office Supplies Candidate Name	Category/Type 001	[MEMO ITEM] Subitemization of Visa Business(09/14/07)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Office Depot		Transaction ID: B-S-757 Date of Disbursement MM / DD / YYYY 09 / 14 / 2007	
Mailing Address 2670 Johnston Street		Amount of Each Disbursement this Period 22.19	
City Lafayette State LA Zip Code 70503-3240	Purpose of Disbursement General Office Supplies Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Visa Business(09/14/07)	

Full Name (Last, First, Middle Initial) B. Uncle Bob's Self Storage		Transaction ID: B-S-748 Date of Disbursement MM / DD / YYYY 09 / 14 / 2007	
Mailing Address 2207 W Pinhook Road		Amount of Each Disbursement this Period 85.95	
City Lafayette State LA Zip Code 70508-3231	Purpose of Disbursement Storage Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Visa Business(09/14/07)	

Full Name (Last, First, Middle Initial) C. United States Postal Service		Transaction ID: B-S-745 Date of Disbursement MM / DD / YYYY 09 / 14 / 2007	
Mailing Address 3603D Ambassador Caffery Parkway		Amount of Each Disbursement this Period 82.00	
City Lafayette State LA Zip Code 70503-5132	Purpose of Disbursement Postage Candidate Name	Category/Type 001 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Subitemization of Visa Business(09/14/07)	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Visa Business		Transaction ID: B-E-9076 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address PO Box 8710		Amount of Each Disbursement this Period 1818.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Little Rock State AR Zip Code 72217-8710		
Purpose of Disbursement SEE MEMO ITEMS	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Visa Business		Transaction ID: B-E-9077 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address PO Box 8710		Amount of Each Disbursement this Period 302.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Little Rock State AR Zip Code 72217-8710		
Purpose of Disbursement SEE MEMO ITEMS	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Iberia Bank		Transaction ID: B-E-9086 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70501-6873		
Purpose of Disbursement Bank Fee	Candidate Name	001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2131.46
TOTAL This Period (last page this line number only) ▶

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Firefly		Transaction ID: B-E-9082 Date of Disbursement 09 / 18 / 2007
Mailing Address 116B Foreman Drive		Amount of Each Disbursement this Period 250.00
City Lafayette State LA Zip Code 70506-6208	Purpose of Disbursement Web Hosting Fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Total HR Solutions LLC		Transaction ID: B-E-9102 Date of Disbursement 09 / 19 / 2007
Mailing Address 102 Versailles Boulevard Suite 314		Amount of Each Disbursement this Period 338.62
City Lafayette State LA Zip Code 70501-6703	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. AT&T Mobility		Transaction ID: B-E-9087 Date of Disbursement 09 / 27 / 2007
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 220.37
City Carol Stream State IL Zip Code 60197-6463	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	808.99
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Marilyn Lee		Transaction ID: B-E-9101 Date of Disbursement 09 / 27 / 2007	
Mailing Address 1228 Myrtle Place		Amount of Each Disbursement this Period 1186.28	
City Lafayette State LA Zip Code 70506-3334	Purpose of Disbursement Payroll	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Iberia Bank		Transaction ID: B-E-9100 Date of Disbursement 09 / 28 / 2007	
Mailing Address 200 W Congress Street		Amount of Each Disbursement this Period 4.95	
City Lafayette State LA Zip Code 70501-6873	Purpose of Disbursement Bank Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

1191.23

TOTAL This Period (last page this line number only)

50836.30

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Transaction ID: B-E-8935 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 7
Mailing Address 320 1st Street SE		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Salvation Army		Transaction ID: B-E-8962 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7
Mailing Address PO Box 3504		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70502	Purpose of Disbursement Charitable Donation Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Junior League of Lafayette		Transaction ID: B-E-8995 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 7
Mailing Address 504 Richland Avenue		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Lafayette State LA Zip Code 70508-6615	Purpose of Disbursement Charitable Donation Candidate Name Category/Type 012	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10750.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Games of Acadiana

Mailing Address PO Box 80763

City State Zip Code
Lafayette LA 70598-0763

Purpose of Disbursement
Charitable Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B-E-9070

Date of Disbursement

09 / 10 / 2007

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

11750.00

Image# 27931326929

Form/Schedule: **F3N**
Transaction ID:

The aggregate total for David Chozen reflects a Runoff 2006 contribution received after the general election.
Please see refund in YE 2006 report.
