CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate
Cynthia Robertson
625 Sophia Lane
Shreveport LA 71115

2. Office Sought (include title of office as well as parish, city, town and/or election district)
Commissioner
caddo parish
9

OFFICE USE ONLY
10/07
Supp
3/5

10003020

2010 MAR -9 AM
RECEIVED

3. Date of Primary 10/20/2007

This report covers from 12/31/2006 thru 12/31/2009

4. Type of Report

____ 180th day prior to primary
____ 90th day prior to primary
____ 30th day prior to primary
____ 10th day prior to primary
____ 10th day prior to general
____ 40th day after general
____ Annual (future election)
X Supplemental (post election)
____ Amendment to prior report

5. FINAL REPORT if:

____ Withdrawn
____ Unopposed
____ Filed after the election AND all loans and debts paid

6. Name and Address of Financial Institution (You are required by law to use one or more banks or savings and loan associations as the depository of all campaign funds.)

Please see attached sheets.

7. Full Name and Address of Treasurer

Please see attached sheets.

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY
a. Name and address of principal campaign committee

b. Name and address of committee's chairperson

c. Name and address of all subsidiary committees, if any (use additional sheets if necessary)

Please see attached sheets.

9.a. Name of person preparing report

b. Daytime telephone

Please see attached sheets.

10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

Dated 03/05/2010

Cynthia N. Robertson
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

318-798-9185
Daytime Telephone

Cynthia N. Robertson
Signature of Treasurer

318-798-9185
Daytime Telephone

Affiliated Persons / Organizations

Name and Address of Other Officer	Candidate Information
Capital One P O Box 61540 New Orleans LA 70161 Chairperson:	Office Sought (include size of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	0.00
2. In-kind contributions (Schedule A-2)	0.00
3. Campaign paraphernalia sales of $25 or less	0.00
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3)	0.00
5. Other Receipts (Schedule A-3)	0.00
6. Loans Received (Schedule B)	0.00
7. Loan Repayments Received (Schedule D)	0.00
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	0.00

DISBURSEMENTS	This Period
9 Expenditures (Schedule E-1)	[illegible]
10 Other Disbursements (Schedule E-2)	[illegible]
11 Loan Repayments Made (Schedule B)	[illegible]
12 Funds Loaned (Schedule D)	[illegible]
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	[illegible]

FINANCIAL SUMMARY	Amount
14 Funds on hand at beginning of reporting period (Must equal funds on hand at close from last report or -0- if first report for this election)	[illegible]
15 Plus total receipts this period (Line 8 above)	+ [illegible]
16 Less total disbursements this period (Line 13 above)	- [illegible]
17. Less in-kind contributions (Line 2 above)	- [illegible]
18 Funds on hand at close of reporting period	[illegible]