CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Michael Gremillion
154 Bernes St
Marksville, La.

2. Office Sought (include title of office as well as parish, city, town and/or election district.)
Councilman
City of Marksville
District 2

OFFICE USE ONLY
10-P 3/10
3/15

10003110

Missing numbered pages were blank and had no information on them.

3. Date of Primary March 27, 2010

This report covers from February 16, 2010 through March 7, 2010

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)
____ Supplemental (past election)
____ Amendment to prior report

5. FINAL REPORT if:

____ Withdrawn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

6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)
Capital One Bank
307 E. Tunica Dr.
Marksville, La. 71351

7. Full Name and Address of Treasurer
Michael James Gremillion
154 Bernes St
Marksville, La.
71351

9. Name of Person Preparing Report Michael Gremillion

Daytime Telephone (318) 253-8915

2010 MAR 17 AM

CAMPAIGN FINANCE RECEIVED

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.

This 12 day of March

[signature]
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

(318) 253-8915
Daytime Telephone

[signature]
Signature of Treasurer

(318) 253-8915
Daytime Telephone

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY
a. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).

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SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	-0-
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphernalia sales of $25 *or less*	
4. **TOTAL CONTRIBUTIONS** (Lines 1 + 2 +3)	-0-
5. Other Receipts (Schedule A-3)	
6. Loans Received (Schedule B)	
7. Loan Repayments Received (Schedule *D*)	
8. **TOTAL RECEIPTS** (Lines 4 + 5 + 6 + 7)	-0-

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	-0-
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	-0-

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)	922.82
15. *Plus* total receipts this period (Line 8 above)	-0-
16. *Less* total disbursements this period (Line 13 above)	-0-
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	922.82

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