CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Melvin Earl Ogburn
P.O. Box 142
Greenwood, LA 71033

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

OFFICE USE ONLY
3/00
Supp
2/22

0101841

3. Date of Primary 3-14-2000
This report covers from 3-23-2000 through 12-31-2000

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____ Withdrawn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

2001 FEB 22 PM 4:00

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

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.)
Peoples State Bank
P.O. Box 1200
Many, LA. 71449 1200

7. Full Name and Address of Treasurer
Melvin Earl Ogburn
P.O. Box 142
Greenwood, LA 71033

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)

9. Name of Person Preparing Report Melvin Ogburn
Daytime Telephone 318 938-5554

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 22 day of February 2001

Melvin Earl Ogburn
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

318 938-5554
Daytime Telephone

Melvin E. Ogburn
Signature of Treasurer

318-938-5554
Daytime Telephone

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SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphernalia sales of $25 or less	
4. **TOTAL CONTRIBUTIONS** (Lines 1 + 2 + 3)	
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)	

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

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)	576 34
15. *Plus* total receipts this period (Line 8 above)	
16. Less total disbursements this period (Line 13 above)	
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	576 34

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SCHEDULE B: LOANS RECEIVED

The following information must be provided for each loan or line of credit received this reporting period, even if it has been repaid. Also, complete this schedule for loans received in prior periods that are still outstanding. Separate loans must be reported separately, even if from the same source. Any personal funds a candidate loans to his campaign must be reported on this schedule.

1. Name and address of lender
Melvin E. Colburn
P.O. Box 142
Greenwood, LA 71033

2. a. Date* _____ b. Interest rate _____ %(a.p.r.)
c. Amount borrowed* ..... $ None
d. Balance due ..... $ _____
*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c.
OPTIONAL: Total amount of credit available $ _____

3. Endorsers/Guarantors

(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

4. Repayments this period

Date	Principal None	Interest

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

1. Name and address of lender

2. a. Date* _____ b. Interest rate _____ %(a.p.r.)
c. Amount borrowed* ..... $ _____
d. Balance due ..... $ _____
*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c.
OPTIONAL: Total amount of credit available $ _____

3. Endorsers/Guarantors

(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

4. Repayments this period

Date	Principal	Interest

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

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