10-2

CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Lester M Ezidore
241 S. Hickory St
P-O Box 983
Gramercy, LA
70052

2. Office Sought (include title of office as well as parish, city, town and/or election district.)
Sheriff
St James
Convent, LA

OFFICE USE ONLY

10/11

30-P

9/15

11004124

3. Date of Primary October 22-2011

This report covers from October 3 2011 through October 22 2011

4. Type of Report:

____ 180th day prior to primary
X 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____ Withdrawn
____ 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, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)
First Bank + Trust
Main Office
909 Poydras Suit 100
N.O. LA. 70112

7. Full Name and Address of Treasurer
Lester M Ezidore
P-O Box 983
Gramercy, LA
70052
Lester M Ezidore

9. Name of Person Preparing Report
Lester Ezidore
Daytime Telephone 504-439-3753

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 15th day of September, 2011

Lester M Ezidore
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

504-439-3753
Daytime Telephone

Lester M Ezidore
Signature of Treasurer

504-439-3753
Daytime Telephone

6. 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).

State of Louisiana
Parish of St. James

This instrument was acknowledged before me on 15 day of Sep 20 11 by Lester Ezidore

Notary Public Wilbur Woods Raynaud
Notary ID Number 11198

2011 SEP 19 AM 10:00

LOUISIANA
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

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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)	868.00

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	868.00
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)	868.00

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)	
15. *Plus* total receipts this period (Line 8 above)	868.00
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	~~[illegible]~~ Jne 700.00

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SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "expenditure" is any payment made for the purpose of supporting your election to public office and includes monies spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are *optional*. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

1. Name and Address of Recipient	2. Expenditures this Reporting Period a. Date(s)	b. Purpose(s)	c. Amount(s)
SIGN NOW	8-24-11	SIGN	220 00
OFFICE DEPOT 1429 ST CHARLES NEW ORLEANS, LA 70130	9-8-11	BUS-CARDS	144 00
QUALIFYING P.O.BOX 179 ST JAMES COURT HOUSE CONVENT, LA 70723	9-18-11	QUALIFYING	450 00
3. SUBTOTAL (optional)			814 00
4. TOTAL (optional – complete only on last page of this schedule)			814 00

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