CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

Jimmy Ray Lynn
8242 Waterwood Dr
Greenwood, La. 71033

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

OFFICE USE ONLY

3/04

2/4

13001190

3. Date of Primary _____

This report covers from _____ through 12-30-12

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
____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.)

People's State Bank
Box 1200
Mary, La. 71449

7. Full Name and Address of Treasurer

SAME AS ABOVE!

8. Name of Person Preparing Report Jimmy Ray Lynn

Daytime Telephone 318-938-1254

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 4 day of February, 2013

Jimmy Ray Lynn
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

318-938-1254
Daytime Telephone

Signature of Treasurer

Daytime Telephone

9. 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)	
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)	— 0 —

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	
10. Other Disbursements (Schedule E-2)	$ 39.00
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	$39.00

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)	$39.00
15. *Plus* total receipts this period (Line 8 above)	
16. *Less* total disbursements this period (Line 13 above)	$ 39.00
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	— $0 —

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SCHEDULE E-2: OTHER DISBURSEMENTS

*This schedule is used to report those disbursements that are not "expenditures"; that is, monies paid by the campaign that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include the payment of taxes or the refund of contributions. Disbursements should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the disbursement should state the reason the payment was made by the campaign.

1. Name and Address of Recipient	2. Date(s)	3. Explanation(s)	4. Amount(s)
St. Jude's Children Research Hospital 501 St. Jude Place Memphis, Tenn 38105	2-4-13	Donation to close acct #457086 at Peoples Bank	$39.00
5. Total OTHER DISBURSEMENTS during this reporting period			

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