CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

CAROLYN GILL JEFFERSON
BOX 750396
NEW ORLEANS LA 70175

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

JUDGE
CIVIL DISTRICT COURT
DIVISION A

OFFICE USE ONLY

3/94
SUPP
2/15

0001382

3. Date of Primary 2-5-94

This report covers from 1-1-99 through 12-31-99

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 (past election)
____ Amendment to prior report

Gill Jefferson

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____ Withdrawn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.)

LIBERTY BANK
3801 CANAL
NEW ORLEANS LA 70119

7. Full Name and Address of Treasurer

JACK SWITZLAND
630 POYDRAS #2245
NEW ORLEANS LA 70130

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

Daytime Telephone

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 FEBRUARY, 2000.

Carolyn H. Gill-Jefferson
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report is principal campaign committee)

504-592-9400
Daytime Telephone

Jack D Switzland
Signature of Treasurer

524-8311
Daytime Telephone

Form 102, Rev. 1/98, Page Rev. 1/96

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)	
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)	77.55
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)	77.55

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)	77.55
15. *Plus* total receipts this period (Line 8 above)	0
16. *Less* total disbursements this period (Line 13 above)	77.55
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	0

Form 102 Rev. 1/04 Page Rev. 4/06

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

CAROLYN GILL JEFFERSON
BOX 750396
NEW ORLEANS LA 70175

2. a. Date* 2/7/94 b. Interest rate 0 %(a.p.r.)

c. Amount borrowed* ..... $ 1035.00

d. Balance due ..... $ 235.00

*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

NONE

(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.

1. Name and address of lender

CAROLYN GILL JEFFERSON
BOX 750396
NEW ORLEANS LA 70175

2. a. Date* 12/25/98 b. Interest rate _____ %(a.p.r.)

c. Amount borrowed* ..... $ 500.00

d. Balance due ..... $ 500.00

*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 $ 0

3. Endorsers/Guarantors

NONE

(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.

Form 102. Rev. 1/98. Page Rev. 4/94.

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)
LIBERTY BANK 3801 CANAL NEW ORLEANS LA 70119	12/31/99	SERVICE CHARGES	22.55
LOVING FOUR BAPTIST CHURCH 2900 THALIA NEW ORLEANS LA 70113	3/9/99	DONATION	55.00
3. SUBTOTAL (optional)			
4. TOTAL (optional - complete only on last page of this schedule)			77.55

Form 102, Rev. 1/98, Page Rev. 5/98.