COMMITTEE'S REPORT

(to be filed by committees that support or oppose more than one candidate and/or proposition)

1. Full Name and Address of Political Committee

ACADIAN AMBULANCE EMPLOYEES POLITICAL ACTION COMMITTEE
P.O. BOX 92970
LAFAYETTE, LA 70509

OFFICE USE ONLY

PAC
ANN
1/13

2. Date of Primary _____

This report covers from 12/21/99 through 12/31/99

3. 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
____ Amendment to prior report

4. All Committee Officers (including Chairperson, Treasurer, if any, and any other committee officers)

a. Name	b. Position	c. Address	
DANIEL J. DOMINGUE	Chairperson	105 LANSFAIR DR.	LAFAYETTE, LA 70503
V. DEAN WRIGHT II	Treasurer	11 BAYOU OAKS	CROWLEY, LA 70526

5. Candidates or Propositions the Committee is Supporting or Opposing (use additional sheets if necessary)

a. Name & Address of Candidate/Description of Proposition	b. Office Sought	c. Political Party	d. Support/Oppose
John Kennedy	State TREASURER		Support
Emma Devillier 58425 St. Clement Plaquemine, LA	State Representative		Support

6. Is the Committee supporting the entire ticket of a political party? _____ Yes ✓ No If "yes", which party?

7. a. Name of Person Preparing Report V. DEAN WRIGHT II

b. Daytime Telephone 337-291-1569

8. 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 13 day of JANUARY 2000

Daniel J. Domingue
Signature of Committee Chairperson

Daytime Telephone

V. Dean Wright II
Signature of Committee Treasurer, if any

Daytime Telephone

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SUMMARY PAGE

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

DISBURSEMENTS	This Period
9. General Expenditures (Schedule E-1)	-0-
10. In-Kind Expenditures (Schedule E-2)	-0-
11. Contributions made to Candidates (Schedule E-3)	750.00
12. **TOTAL EXPENDITURES** (Lines 9 + 10 + 11)	750.00
13. Other Disbursements (Schedule E-4)	-0-
14. Loan Repayments Made (Schedule B)	-0-
15. Funds Loaned (Schedule D)	-0-
16. **TOTAL DISBURSEMENTS** (Lines 12 + 13 + 14 + 15)	750.00

FINANCIAL SUMMARY	Amount
17. 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 committee)	4,223.47
18. *Plus* total receipts this period (*less* in-kind contributions received) (Line 8 above minus line 2 above)	-0-
19. *Less* total disbursements this period (*less* in-kind expenditures) (Line 16 above minus line 10 above)	750.00
20. Funds on hand at close of reporting period	3473.47

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SCHEDULE E-3: CONTRIBUTIONS MADE TO CANDIDATES

The following information must be provided for direct contributions made to candidates or their campaign committees, during this reporting period, except for in-kind expenditures. All candidates listed on this schedule should also be listed on the Cover Page in Item 6. Report all in-kind expenditures, including those made to candidates, on SCHEDULE E-2: IN-KIND EXPENDITURES. Totals and subtotals at bottom of the 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 Candidate	2. Contributions Made this Reporting Period a. Date(s)	b. Amount(s)
John Kennedy	12/28/99	500.00
Emma Devillier 58425 St. Clement Ave. Plaquemine, LA	12/21/99	250.00
3. SUBTOTAL (optional)		750.00
4. TOTAL (optional - complete only on last page of this schedule)		750.00

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