CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
COMMITTEE TO ELECT WILLIAM YARBROUGH
P.O. BOX 177

SICILY ISLAND LA 71368

2. Office Sought (include title of office as well as parish, city, town and/or election district)
District Judge - Division A
Catahoula Concordia Parishes
7th Judicial Distric

OFFICE USE ONLY
10/02
Supp
3/6

0302432

3. Date of Primary 10/05/2002

This report covers from 10/16/2002 thru 11/16/2002

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

5. FINAL REPORT if:

___ Withdrawn
X Filed after the election AND all loans and debts paid
___ Unopposed

6. Name and Address of Financial Institution (You are required by law to use one or more banks or savings and loan associations as the depository of all campaign funds.)

Please see attached sheets.

7. Full Name and Address of Treasurer

Please see attached sheets.

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)

8.a. Name of person preparing report

b. Daytime telephone

Please see attached sheets

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.

Dated ~~09/05/2002~~ 11-16-2002

Sue Goode Sue Goode
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

318-389-5760
Daytime Telephone

Sue Goode Sue Goode
Signature of Treasurer

318-398-5760
Daytime Telephone

HAND DELIVERED

Please see attached sheets.

Affiliated Persons / Organizations

Name and Address of Chair Person SUE GOODE P.O. BOX 177 SIGILY ISLAND LA 71368 Chairperson:	Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	0.00
2. In-kind contributions (Schedule A-2)	0.00
3. Campaign paraphernalia sales of $25 or less	0.00
4. **TOTAL CONTRIBUTIONS** (Lines 1 + 2 + 3)	0.00
5. Other Receipts (Schedule A-3)	0.00
6. Loans Received (Schedule B)	0.00
7. Loan Repayments Received (Schedule D)	0.00
8. **TOTAL RECEIPTS** (Lines 4 + 5 + 6 + 7)	0.00

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	
10. Other Disbursements (Schedule E-2)	0.00
11. Loan Repayments Made (Schedule B)	454.04
12. Funds Loaned (Schedule D)	0.00
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	454.04

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)	454.04
15. Plus total receipts this period (Line 8 above)	+ 0.00
16. Less total disbursements this period (Line 13 above)	- 454.04
17. Less in-kind contributions (Line 2 above)	- 0.00
18. Funds on hand at close of reporting period	Ø

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

William Yarbrough

2. a. Date* 7/11 - 10/2 b. Interest rate _____ %(a.p.r.)

c. Amount borrowed* ..... $ 9361.50

d. Balance due ..... $ Ø

*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

Loan forgiven

(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
11/13/02	454.04	

(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.)

Form 100, Rev. 3/98. Page Rev. 3/98.