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

Treme Improvement Political Society

1517 Harrison Ave.

New Orleans, LA 70122

OFFICE USE ONLY

Pac
40-G
5/29

0303400

2. Date of Primary 04/07/2001

This report covers from 04/16/2001 through 08/04/2001

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

X ___ 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
Norman R. Smith	Chairperson	4553 Tulip Street New Orleans, LA 70126
Paul West	Treasurer	2625 Orleans Ave. New Orleans, LA 70119

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
Various Candidates			

6. Is the Committee supporting the entire ticket of a political party? ____ Yes X ____ No If "Yes", which party?

7. a. Name of Person Preparing Report Kenneth C. Pailet

b. Daytime Telephone (504) 837 - 0770

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 29th day of May, 2003

Signature of Committee/Chairperson

504-948-5688
Daytime Telephone

Signature of Committee/Treasurer, if any

504-528-2941
Daytime Telephone

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions Received (Schedule A-1)	0.00
2. In-Kind Contributions Received (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. General Expenditures (Schedule E-1)	598.17
10. In-Kind Expenditures (Schedule E-2)	0.00
11. Contributions made to Candidates (Schedule E-3)	0.00
12. **TOTAL EXPENDITURES** (Lines 9 + 10 + 11)	598.17
13. Other Disbursements (Schedule E-4)	0.00
14. Loan Repayments Made (Schedule B)	0.00
15. Funds Loaned (Schedule D)	0.00
16. **TOTAL DISBURSEMENTS** (Lines 12 + 13 + 14 + 15)	598.17

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)	11591.45
18. Plus total receipts this period (less in-kind contriubtions received) (Line 8, above minus Line 2, above)	+ 0.00
19. Less total disbursements this period (less in-kind expenditures) (Line 16, above minus Line 10, above)	- 598.17
20. Funds on hand at close of reporting period	10993.28

Form 202, Rev. 4/94.

(Receipts from the sale of campaign paraphernalia are contributions and must also be reported on Schedule A-1 or Line 3, above)	0.00

SCHEDULE E-1: GENERAL EXPENDITURES

Use this schedule to report information on most committee expenditures, during this reporting period. If the expenditure directly benefited a particular candidate(s), list the candidate(s) name under item 1. However, (1) in-kind expenditures, and (2) expenditures to candidates or their committees should be reported on SCHEDULES E-2 and E-3, respectively, and should not be reported on this schedule. An expenditure is any payment made for the purpose of supporting or opposing the election of a candidate for public office or supporting or opposing a proposition or question submitted to the voters. Expenditures include monies spent for the committee's general operating expenses. Any payments made that are not expenditures should be reported on SCHEDULE E-4: OTHER DISBURSEMENTS. Totals and

1. Name and Address of Recipient	2. Expenditures this Reporting Period a. Date(s)	b. Purpose(s)	b. Amount(s)
Arch Wireless P.O. Box 411000 Charlotte, NC 28241-1000 Candidate Beneficiaries:	05/11/2001	Telephone	300.73
Hebert Enterprises Inc. New Orleans, LA 70163 Candidate Beneficiaries:	05/31/2001	Printing	297.44
Candidate Beneficiaries:			
Candidate Beneficiaries:			
Candidate Beneficiaries:			
Candidate Beneficiaries:			
Candidate Beneficiaries:			
3. SUBTOTAL (optional)			598.17
4. TOTAL (complete only on last page of this schedule)			598.17

Form 202, Rev. 3/98.