CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

Albert J. Foulcard
700 Magnolia
Franklin, La. 70538

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

St. Mary Parish Council
Dist. 2
Franklin, La. 70538

OFFICE USE ONLY

70-G 10/03
10/14

0311903

3. Date of Primary October 4, 2003

This report covers from Election Day Expense through

4. Type of Report:

____ 60th 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

Same report as #309630

5. FINAL REPORT if:

____ Withdrawn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

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED
2003 OCT 15 PM 12:53

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.)

7. Full Name and Address of Treasurer

8. Name of Person Preparing Report Eugene Foulcard

Daytime Telephone 337-828-5705

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 13th day of October 2003.

A. J. Foulcard
Signature of Candidate/Chairperson
(To be signed by Chairperson *only* if report by principal campaign committee)

337 828-5496
Daytime Telephone

Eugene Foulcard
Signature of Treasurer

337-828-5705
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).

Form 102. Rev. 1/88. Page Rev. 3/00.