# CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

Patrick Swilling
5400 Eastover Dr.
New Orleans, LA 70128

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

State Representative
District 100

OFFICE USE ONLY

Amendment
Supp 2/01
#401596

401596

3. Date of Primary Feb. 17, 2001

This report covers from Jan. 1, 2003 through Dec. 31, 2003

4. Type of Report:

____180th day prior to primary
____60th 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 (post election)
401596
X Amendment to prior report

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.)

7. Full Name and Address of Treasurer

GEORGE W. ROBERTSON, JR.
4425 PLUM ORCHARD AVE.
N.O., LA 70126

Rec 8/6/04 2:01 pm

8. 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 6 day of AUGUST, 2004

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

504-242-9242
Daytime Telephone

George W. Robertson Jr.
Signature of Treasurer

504-587-8633
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).

AMENDMENT ATTACHED

AMENDMENT

# CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

PATRICK SWILLING
6400 EASTOVER DRIVE
NEW ORLEANS, LA 70128

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

STATE REPRESENTATIVE
DISTRICT 100
NEW ORLEANS, LA

OFFICE USE ONLY

Supp 2/01
2/17

0401596

3. Date of Primary February 17, 2001

This report covers from _____ through _____

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)
✓ Supplemental (past election)
____Amendment to prior report

SCANNED
MAR 02 2004
By: AB

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.)

HIBERNIA NATIONAL BANK
BULLARD AVE. BRANCH
NEW ORLEANS, LA

7. Full Name and Address of Treasurer

GEORGE W. ROBERTSON, JR.
4425 PLUM ORCHARD AVE.
N.O., LA. 70126

9. Name of Person Preparing Report GEORGE ROBERTSON

Daytime Telephone (504) 587-8633

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 _____ day of _____, _____.

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

(504) 942-9242
Daytime Telephone

George W. Robertson Jr.
Signature of Treasurer

(504) 587-8633
Daytime Telephone

8. 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. 1/98, Page Rev. 2/00

# SUMMARY PAGE

| RECEIPTS | This Period |
|---|---|
| 1. Contributions (Schedule A-1) | |
| 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) | |

| DISBURSEMENTS | This Period |
|---|---|
| 9. Expenditures (Schedule E-1) | |
| 10. Other Disbursements (Schedule E-2) | |
| 11. Loan Repayments Made (Schedule B) | 21,960.29 |
| 12. Funds Loaned (Schedule D) | |
| 13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12) | 21,960.29 |

| 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) | 21,960.29 |
| 15. *Plus* total receipts this period (Line 8 above) | |
| 16. *Less* total disbursements this period (Line 13 above) | 21,960.29 |
| 17. *Less* in-kind contributions (Line 2 above) | |
| 18. Funds on hand at close of reporting period | -0- |

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AMENDMENT

# 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

Patrick Swilling

2. a. Date* _____ b. Interest rate _____ %(a.p.r.)

c. Amount borrowed* ..... $ 113,185.86

d. Balance due ..... $ 91,225.57

*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 |
|---|---|---|
| 1/1/03 | 21,960.29 | |

(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 102, Rev. 5/98, Page Rev. 4/98.



AMENDMENT

# SCHEDULE D: FUNDS LOANED

The following information must be provided for each loan or line of credit made this reporting period, even if it has been repaid. Also, complete this schedule for loans made in prior periods that are still outstanding. Separate loans must be reported separately, even if to the same borrower.

1. Name and address of borrower

PATRICK SWILLING
6400 EASTOVER DRIVE
N.O., LA 70128

2. a. Date* VARIOUS b. Interest rate 9 %(a.p.r.)

c. Amount loaned* ..... $ 113,185.86

d. Balance due ..... $ 113,185.86

*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.)

1. Name and address of borrower

2. a. Date*_____ b. Interest rate _____%(a.p.r.)

c. Amount loaned* ..... $_____

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.)

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