CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Emile Joseph Maguire III
13115 Maguire Lane
Hammond, LA 70401

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)
Parish Councilman
Tangipahoa Parish
District 6.
Hammond

OFFICE USE ONLY
Ann
2/13

0402267

3. Date of Primary March 9, 2004

This report covers from January 9, 2004 through Feburary 9, 2004

4. Type of Report:

____180th day prior to primary
____90th day prior to primary
X 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

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.)
Parish National Bank
P.O. Box 1470
Covington, LA 70434

7. Full Name and Address of Treasurer
Emile Joseph Maguire III
13115 Maguire Lane
Hammond, LA 70401

9. Name of Person Preparing Report Emile Joseph Maguire III

Daytime Telephone 985-345-8027

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 12 day of Feburary 2004

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

985-345-7090
Daytime Telephone

Signature of Treasurer

985-345-7090
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).
N/A

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