CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
RONALD "TB" SCALLAN
PO BOX 565
LIVONIA LA. 70755

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)
MAYOR
LIVONIA, TOWN OF,
POINTE COUPE PARISH
PRECINCT 18

OFFICE USE ONLY
9/04
30-P
9/7
04055591

3. Date of Primary SEPTEMBER 18, 2004
This report covers from AUGUST 10, 2004 through AUGUST 29, 2004

Same report as #704617

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

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.)
N/A
PETTY CASH FUND

7. Full Name and Address of Treasurer
DALE SCALLAN
PO BOX 565
LIVONIA LA. 70755

9. Name of Person Preparing Report DALE SCALLAN
Daytime Telephone 225-637-3584

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 7th day of SEPTEMBER, 2004.

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

225-638-5894
Daytime Telephone

x Dale Scallan
Signature of Treasurer

225-637-3584
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. 1/96, Page Rev. 3/00