CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

Paul D. Kates
627 Montgomery
Bogalusa LA 70427

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

City Councilman
Washington Parish
Bogalusa LA

OFFICE USE ONLY

Supp 10/98
1/27

3. Date of Primary Oct 3, 1998

This report covers from Nov 4 1998 through Dec. 31, 1999

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)
X Supplemental (past election)
____Amendment to prior report

5. FINAL REPORT if:

____Withdrawn
____Unopposed
X 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
Bogalusa LA 70427

7. Full Name and Address of Treasurer

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

a. Name and address of principal campaign committee

b. Name and address of committee's chairperson

c. Name and address of all subsidiary committees, if any (Use additional sheets if necessary)

9. Name of Person Preparing Report

Daytime Telephone (504) 732-7924

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 25th day of January 2000

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

(504) 732-7924
Daytime Telephone

Paul D. Kates
Signature of Treasurer

Daytime Telephone

Form 102 Rev. 1/98 Page Rev. 1/98

C.421

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)	-0-

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	439.31
12. Funds Loaned (Schedule D)	
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	439.31

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)	439.31
15. *Plus* total receipts this period (Line 8 above)	-0-
16. *Less* total disbursements this period (Line 13 above)	439.31
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	-0-

Form 102 Rev. 1/96, Page Rev. 4/96.

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
Hibernia National Bank
Bogalusa LA 70427

2. a. Date* 10/98 b. Interest rate _____%(a.p.r.)
c. Amount borrowed* ..... $ 2500.00
d. Balance due ..... $ -0-

*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
Balance for Loan Forgiven

(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
11/29/99	439.31	

(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. 1/98, Page Rev. 4/94.