CANDIDATE'S REPORT

[to be filed by a candidate or his principal campaign committee]

1. Qualifying Name and Address of Candidate

Amanda T. McKinney
P.O. Box 2431
St. Francisville, LA
70775

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

West Feliciana
School Board
St. Francisville, LA.
District 1

OFFICE USE ONLY

10/00
40-G
12/18

0004772

3. Date of Primary _____

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

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____ Withdrawn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.)

Bank of St. Francisville
St. Francisville, LA.
70775

7. Full Name and Address of Treasurer

Amanda McKinney
P.O. Box 2431
St. Francisville, LA
70775

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: Amanda T. McKinney

Daytime Telephone: 225-635-9758

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 11th day of December, 2000

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

225-635-9118
Daytime Telephone

Signature of Treasurer

Daytime Telephone

HAND DELIVERED

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SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1) Personal Funds	183.75
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)	183.75

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	~~183.25~~ 314.60

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)	130.85
15. *Plus* total receipts this period (Line 8 above)	183.75
16. *Less* total disbursements this period (Line 13 above)	~~173.25~~ 314.60
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	~~141.35~~ (-) Balance

Form 102, Rev. 1/00, Page Rev. 4/00.

SCHEDULE E-1: EXPENDITURES

Use this schedule to report information on all campaign expenditures for this reporting period. An "expenditure" is any payment made for the purpose of supporting your election to public office and includes monies spent for the campaign's general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-2: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are *optional*. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

1. Name and Address of Recipient	2. Expenditures this Reporting Period a. Date(s)	b. Purpose(s)	c. Amount(s)
St. Francisville Democrat Louisiana Suburban Press 5240 Groom Rd Baker, LA 70714	10/27 11/10	Newspaper ads	128.25 45.00
Treasurer of the State of LA Louisiana Board of Ethics 8401 United Plaza Baton Rouge 70809	12/16	Partial Payment of Late fee	141.35
3. SUBTOTAL (optional)			
4. TOTAL (optional - complete only on last page of this schedule)			

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