# CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

PAM GASPARD
709 W. ST. MARY
ABBEVILLE, LA 70510

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

FUTURE ELECTION

OFFICE USE ONLY

Supp 4/03
1/19

0500337

3. Date of Primary FUTURE ELECTION

This report covers from 1-1-04 through 12-31-04

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
X 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____ Withdrawn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

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED
2005 JAN 20 AM 10: 55

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.)

GULF COAST BANK
P.O. DRAWER 490
ABBEVILLE, LA 70510

7. Full Name and Address of preparer

ALLEN J. LABRY, CPA
P.O. BOX 1055
ABBEVILLE, LA 70511-1055

Missing numbered pages were blank and had no information on them

9. Name of Person Preparing Report ALLEN J. LABRY, CPA

Daytime Telephone 337-893-7944

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 18th day of January 2005

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

337-893 1103
Daytime Telephone

Signature of Treasurer

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).

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# SUMMARY PAGE

| RECEIPTS | This Period |
|---|---|
| 1. Contributions (Schedule A-1) | NONE |
| 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) | NONE |

| DISBURSEMENTS | This Period |
|---|---|
| 9. Expenditures (Schedule E-1) | 150 |
| 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) | 150 |

| 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) | 372.85 |
| 15. *Plus* total receipts this period (Line 8 above) | |
| 16. *Less* total disbursements this period (Line 13 above) | 150.00 |
| 17. *Less* in-kind contributions (Line 2 above) | |
| 18. Funds on hand at close of reporting period | 222.85 |

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# 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<br>a. Date(s) | b. Purpose(s) | c. Amount(s) |
|---|---|---|---|
| TRIAD<br>101 S. STATE ST.<br>ABBEVILLE, LA 70510 | 1-14-04 | DONATION | 50.00 |
| WILLIE MOUNT<br>CINDY CAMPISI<br>1401 S. STATE ST.<br>ABBEVILLE, LA 70510 | 9-03-04 | DONATION | 100.00 |
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| 3. SUBTOTAL (optional) | | | 150.00 |
| 4. TOTAL (optional - complete only on last page of this schedule) | | | |

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