CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate

Samuel G. Couvillon
4730 Highway 1
Marksville, Louisiana 71351

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

Clerk of Court
Avoyelles Parish

OFFICE USE ONLY

10/03

2/11

05013332

3. Date of Primary October 4, 2003

This report covers from February 12, 2004 through February 15, 2005

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____ Withdrawn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.)

Cottonport Bank
P. O. Box 5
Marksville, Louisiana 71351

7. Full Name and Address of Treasurer

Susan Laprairie
432 South Washington
Marksville, La 71351

8. Name of Person Preparing Report Susan C. Laprairie

Daytime Telephone 318-253-6976

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 10th day of February, 2005

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

318-253-7523
Daytime Telephone

Susan C. Laprairie
Signature of Treasurer

318-253-6976
Daytime Telephone

9. 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).

LOUISIANA ETHICS ADMINISTRATION CAMPAIGN FINANCE RECEIVED
2005 FEB 14 PM 12:29

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SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	0
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphernalia sales of $25 *or less*	
4. **TOTAL CONTRIBUTIONS** (Lines 1 + 2 +3)	0
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)	0
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	Loan Forgiven
12. Funds Loaned (Schedule D)	
13. **TOTAL DISBURSEMENTS** (Lines 9 + 10 + 11 + 12)	0

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

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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

Mr. and Mrs. Samuel G. Couvillon
4730 Highway 1
Marksville, Louisiana 71351

2. a. Date* 8-19-03 b. Interest rate _____ %(a.p.r.)

c. Amount borrowed* ..... $ 5,000.00

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

(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
Loan Forgiven		

(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.)

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