CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Cynthia M. Ahart
522 E. North St.
Opelousas, LA.
70570

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)
State Representative
Opelousas, LA.
St. Landry Parish
District 40

OFFICE USE ONLY
9/04
Supp 2/15
0501558

3. Date of Primary 09/18/2004
This report covers from Oct 13, 2004 through 12-31-2004

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____ Withdrawn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.)
American Bank
307 E. Landry St.
Opelousas, LA 70570

7. Full Name and Address of Treasurer
Self

9. Name of Person Preparing Report Cynthia M. Ahart
Daytime Telephone 337-942-2898

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 15 day of February 2005

Cynthia M. Ahart
Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

337-942-2898
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).

Form 102, Rev. 1/88, Page Rev. 3/00

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) no activity	
7. Loan Repayments Received (Schedule D)	
8. **TOTAL RECEIPTS** (Lines 4 + 5 + 6 + 7)	

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)	

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)	
15. *Plus* total receipts this period (Line 8 above)	
16. *Less* total disbursements this period (Line 13 above)	
17. *Less* in-kind contributions (Line 2 above)	no activity
18. Funds on hand at close of reporting period	no activity

Form 102, Rev. [illegible], Page Rev. [illegible]

 Stays the same