COMMITTEE'S REPORT

(Filed by committees that support or oppose one or more candidates and/or propositions and that are not candidate committees)

1. Full Name and Address of Political Committee

Hibernia People for Good Government
11130 Industridex Blvd
Baton Rouge, LA 70809

OFFICE USE ONLY

Pre
Monthly
9/12

0503990

2. Date of Primary _____

This report covers from 8/01/2005 through 8/31/2005

3. 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
X Monthly
____ Amendment to prior report

Missing numbered pages were blank and had no information on them.

4. All Committee Officers (including Chairperson, Treasurer, if any, and any other committee officers)

a. Name	b. Position	c. Address
Judy Dawson	Chairperson	P.O. Box 61540, New Orleans, LA 70161
Anne Oestriecher	Treasurer	P.O. Box 61540, New Orleans, LA 70161

5. Candidates or Propositions the Committee is Supporting or Opposing (use additional sheets if necessary)

a. Name & Address of Candidate/Description of Proposition	b. Office Sought	c. Political Party	d. Support/Oppose

6. Is the Committee supporting the entire ticket of a political party? ____ Yes X No If "yes", which party?

7. a. Name of Person Preparing Report Anne Oestriecher

b. Daytime Telephone 225-376-7577

8. 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 12th day of September, 2005.

Signature of Committee Chairperson

Daytime Telephone

Anne Oestriecher
Signature of Committee Treasurer, if any

225-376-7577
Daytime Telephone

Form 202, Rev. 3/96, Page Rev. 5/01

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions Received (Schedule A-1)	
2. In-kind Contributions Received (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. General Expenditures (Schedule E-1)	
10. In-Kind Expenditures (Schedule E-2)	
11. Contributions made to Candidates (Schedule E-3)	250.00
12. **TOTAL EXPENDITURES** (Lines 9 + 10 + 11)	
13. Other Disbursements (Schedule E-4)	
14. Loan Repayments Made (Schedule B)	
15. Funds Loaned (Schedule D)	
16. **TOTAL DISBURSEMENTS** (Lines 12 + 13 + 14 + 15)	250.00

FINANCIAL SUMMARY	Amount
17. 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 committee)	12,953.89
18. *Plus* total receipts this period (*less* in-kind contributions received) (Line 8 above minus line 2 above)	
19. *Less* total disbursements this period (*less* in-kind expenditures) (Line 16 above minus line 10 above)	250.00
20. Funds on hand at close of reporting period	12,703.89

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SCHEDULE E-3: CONTRIBUTIONS MADE TO CANDIDATES

The following information must be provided for direct contributions made to candidates or their campaign committees, during this reporting period, except for in-kind expenditures. All candidates listed on this schedule should also be listed on the Cover Page in Item 5. Report all in-kind expenditures, including those made to candidates, on SCHEDULE E-2: IN-KIND EXPENDITURES. Totals and subtotals at bottom of the 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 Candidate	2. Contributions Made this Reporting Period a. Date(s)	b. Amount(s)
Representative Cedric Glover 401 Edwards Ave, Suite 219 Shreveport, LA 71101 La House, District 4	8/15/05	$250.00
3. SUBTOTAL (optional)		
4. TOTAL (optional - complete only on last page of this schedule)		250.00

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