# 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

Citizens for a Better Bossier Charter
P.O. Box 5820
Bossier City, LA 71171

OFFICE USE ONLY

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0600926

2. Date of Primary 4/17/04

This report covers from 1/1/06 through

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 FINAL REPORT
- ____ Monthly
- ____ Amendment to prior report

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

| a. Name | b. Position | c. Address |
|---|---|---|
| Scott C. Sinclair | Chairperson | P.O. Box 1026, Shreveport LA 71163-1026 |
| Timothy A. Larkin | Treasurer | P.O. Box 5820, Bossier City LA 71171 |

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 |
|---|---|---|---|
| NA | | | |

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

Paula Baker

b. Daytime Telephone 318/747-2300

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 3 day of February 2006

Signature of Committee Chairperson Scott C. Sinclair — 318/424-4901 Daytime Telephone

Signature of Committee Treasurer, if any Timothy A. Larkin — 318/208-2300 Daytime Telephone

Form 202, Rev. 3/98, Page Rev. 5/01

# SUMMARY PAGE

| RECEIPTS | This Period |
|---|---|
| 1. Contributions Received (Schedule A-1) | 0 |
| 2. In-kind Contributions Received (Schedule A-2) | 0 |
| 3. Campaign paraphernalia sales of $25 or *less* | 0 |
| 4. **TOTAL CONTRIBUTIONS** (Lines 1 + 2 +3) | 0 |
| 5. Other Receipts (Schedule A-3) | 0 |
| 6. Loans Received (Schedule B) | 0 |
| 7. Loan Repayments Received (Schedule D) | 0 |
| 8. **TOTAL RECEIPTS** (Lines 4 + 5 + 6 + 7) | 0 |

| DISBURSEMENTS | This Period |
|---|---|
| 9. General Expenditures (Schedule E-1) | 0 |
| 10. In-Kind Expenditures (Schedule E-2) | 0 |
| 11. Contributions made to Candidates (Schedule E-3) | 0 |
| 12. **TOTAL EXPENDITURES** (Lines 9 + 10 + 11) | 0 |
| 13. Other Disbursements (Schedule E-4) | 241.68 |
| 14. Loan Repayments Made (Schedule B) | 0 |
| 15. Funds Loaned (Schedule D) | 0 |
| 16. **TOTAL DISBURSEMENTS** (Lines 12 + 13 + 14 + 15) | 241.68 |

| 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) | 241.68 |
| 18. *Plus* total receipts this period (*less* in-kind contributions received) (Line 8 above minus line 2 above) | 0 |
| 19. *Less* total disbursements this period (*less* in-kind expenditures) (Line 16 above minus line 10 above) | 241.68 |
| 20. Funds on hand at close of reporting period | 0 |

Form 202, Rev. 3/98, Page Rev. 3/98

# SCHEDULE E-4: OTHER DISBURSEMENTS

This schedule is used to report those disbursements that are not "expenditures"; that is, monies paid by the committee that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office or supporting or opposing a proposition or question submitted to the voters. Examples include the payment of taxes or the refund of contributions. Disbursements should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the disbursement should state the reason the payment was made by the committee.

| 1. Name and Address of Recipient | 2. Date | 3. Explanation | 4. Amount |
|---|---|---|---|
| Citizens National Bank<br>P.O. Box 6266<br>Bossier City, LA 71111 | 1/10/06 | Bank Service Charge | 25.00 |
| St. Judes Children's Research Hospital<br>P.O. Box 50<br>Memphis, TN 38101 | 1/31/06 | surplus funds donated | 216.68 |
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| 5. Total OTHER DISBURSEMENTS during this reporting period | | | 241.68 |

Form 202, Rev. 3/98, Page Rev. 3/98