CANDIDATE'S REPORT

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

1. Qualifying Name and Address of Candidate
Lillian Priest
3734 Claiborne Ave.
Shreveport, LA 71109

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)
Caddo Parish School Bd.
District 7

OFFICE USE ONLY
7/04
2/13

0601811

3. Date of Primary 9/18/2004

This report covers from 12/04/04 through 12/31/05

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

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

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.)
Shreveport Federal Credit Union
P.O. Box 3261
Shreveport, LA 71133

7. Full Name and Address of Treasurer
Helen Godfrey-Smith
P.O. Box 3261
Shreveport, LA 71133

9. Name of Person Preparing Report Lillian Priest

Daytime Telephone (318) 222-3750

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 10 day of February 2006

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

318-222-3750
Daytime Telephone

Helen Godfrey-Smith
Signature of Treasurer

318-798-4061
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)	-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)	190.75
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)	190.75

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)	192.04
15. *Plus* total receipts this period (Line 8 above)	
16. *Less* total disbursements this period (Line 13 above)	190.75
17. *Less* in-kind contributions (Line 2 above)	
18. Funds on hand at close of reporting period	1.29

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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 a. Date(s)	b. Purpose(s)	c. Amount(s)
Cingular Wireless P.O. BOX 598125 Orlando, FL 32859-8125	February 2005	Communications	$ 130.75
Shreveport Federal Credit Union P.O. BOX 3261 Shreveport, LA 71133	Monthly	Service Charge	60.00
3. SUBTOTAL (optional)			$ 190.75
4. TOTAL (optional - complete only on last page of this schedule)			$ 190.75

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