OTHER PERSON'S REPORT

(filed by a person that makes expenditures or accepts contributions, other than to or from a candidate or political committee in support or opposition of one or more candidates)

0904325

1. Full Name and Address

Crawford L. Jordan Jr
PO Box 30
Winnfield, LA 71483

OFFICE USE ONLY

40-G 10/09

10/19

2. Date of Election 10-17-09

This report covers from 9-28-09 through 11-16-09

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/Supplemental
____Amendment to prior report

4. Candidates Supported or Opposed (use additional sheets if necessary)

a. Name & Address of Candidate	b. Office Sought	c. Political Party	d. Support/Oppose
1% Sales Tax Election	Winn Parish	Republican	Oppose

5. a. Name of Person Preparing Report

C. L. Jordan

b. Daytime Telephone 318-209-0770

6. I HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of my 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 19th day of October 2009

Signature

318-209-0770
Daytime Telephone

2009 OCT 20 PM 4:17
LOUISIANA ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

Form 305, Rev. 11/04, Page Rev. 7/01

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. **TOTAL RECEIPTS** (Lines 4 + 5 + 6)	

DISBURSEMENTS	This Period
8. General Expenditures (Schedule D)	
9. **TOTAL EXPENDITURES** (Line 8)	

FINANCIAL SUMMARY	Amount
10. 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)	
11. *Plus* total receipts this period (*less* in-kind contributions received) (Line 7 above minus line 2 above)	
12. *Less* total disbursements this period (Line 9 above)	
13. Funds on hand at close of reporting period	

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