

CANDIDATE'S REPORT

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

<p>1. Qualifying Name and Address of Candidate</p> <p><i>Paul R. Madere</i> 616 Gordon Ave Harahan LA 70123</p>	<p>2. Office Sought (Include title of office as well as parish, city, town and/or election district.)</p> <p><i>Harahan City Alderman</i></p>	<p style="text-align: center;">OFFICE USE ONLY</p> <p style="text-align: right; font-size: 2em;">982336</p> <p style="text-align: center; font-size: 1.5em;">30-P <i>14/98</i> 9/1</p> <p style="text-align: right; font-size: 0.8em;">98 SEP 2 AM 1:30</p> <p style="text-align: right; font-size: 0.8em;">FILED CLERK OF COURSE</p>
<p>3. Date of Primary <u>October 3rd 1998</u></p> <p>This report covers from <u>August 21, 1998</u> through <u>Nov. 1998</u></p>		
<p>4. Type of Report:</p> <p><input type="checkbox"/> 180th day prior to primary <input type="checkbox"/> 40th day after general</p> <p><input type="checkbox"/> 90th day prior to primary <input type="checkbox"/> Annual (future election)</p> <p><input checked="" type="checkbox"/> 30th day prior to primary <input type="checkbox"/> Supplemental (past election)</p> <p><input type="checkbox"/> 10th day prior to primary</p> <p><input type="checkbox"/> 10th day prior to general <input type="checkbox"/> Amendment to prior report</p>		
<p>5. FINAL REPORT IS:</p> <p><input type="checkbox"/> Withdrawn <input type="checkbox"/> Filed after the election AND all loans and debts paid</p> <p><input type="checkbox"/> Unopposed</p>		
<p>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.)</p> <p><i>Windsor National Bank (HARAHAN BRANCH)</i></p>	<p>7. Full Name and Address of Treasurer</p> <p><i>Brenda Alford MADERE</i></p>	<p>8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY</p> <p>a. Name and address of principal campaign committee</p> <p>b. Name and address of committee's chairperson</p> <p>c. Name and address of all subsidiary committees, if any (Use additional sheets if necessary)</p>
<p>9. Name of Person Preparing Report <u>Paul R. Madere</u></p> <p>Daytime Telephone <u>737-8657</u></p>		
<p>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.</p> <p>This <u>1st</u> day of <u>September 98</u>.</p>		
<p><i>Paul Madere</i> _____ Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee)</p>		<p><u>737-8657</u> _____ Daytime Telephone</p>
<p><i>Brenda Alford Madere</i> _____ Signature of Treasurer</p>		<p><u>737-7765</u> _____ Daytime Telephone</p>

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	576.63
2. In-kind Contributions (Schedule A-2)	0
3. Campaign paraphernalia sales of \$25 or less	0
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3)	576.63
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. Expenditures (Schedule E-1)	576.63
10. Other Disbursements (Schedule E-2)	0
11. Loan Repayments Made (Schedule B)	0
12. Funds Loaned (Schedule D)	0
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	576.63

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period <small>(Must equal funds on hand at close from last report or -0- if first report for this election)</small>	576.63
15. <i>Plus</i> total receipts this period <small>(Line 8 above)</small>	0
16. <i>Less</i> total disbursements this period <small>(Line 13 above)</small>	0
17. <i>Less</i> in-kind contributions <small>(Line 2 above)</small>	0
18. Funds on hand at close of reporting period	0

SUMMARY PAGE (continued)

INVESTMENTS	Amount
19. Of funds on hand at beginning of reporting period (Line 14, above), amount held in investments (i.e., savings accounts, CD's, money market funds, stocks, bonds, etc.)	Ø
20. Of funds on hand at close of reporting period (Line 18, above), amount held in investments	Ø

SPECIAL TRANSACTIONS	This Period
21. Candidate's personal funds (Use of personal funds as either a contribution or loan to the campaign should be reported on Schedules A-1 or B.)	576.63
22. Contributions received from political committees (From Schedules A-1 and A-2)	Ø
23. All proceeds from the sale of tickets to fundraising events (Receipts from the sale of tickets are contributions and must also be reported on Schedule A-1.)	Ø
24. Proceeds from the sale of campaign paraphernalia (Receipts from the sale of campaign paraphernalia are contributions and must also be reported on Schedule A-1 or Line 3, above.)	Ø
25. Expenditures from petty cash fund (Must also be reported on Schedule E-1.)	Ø

NOTICE

The personal use of campaign funds is prohibited.* The use of campaign funds must be related to a political campaign or the holding of a public office or party position. However, campaign funds may be used to reimburse a candidate for expenses related to his campaign or office, to pay taxes on the interest earned on campaign funds or to replace articles lost, stolen, or damaged in connection with a campaign.

Excess campaign funds may be returned to contributors on a pro rata basis, given as a charitable contribution as provided in 26 USC 170(c), given to a charitable organization as defined in 26 USC 501(c)(3), expended in support of or opposition to a proposition, political party, or candidacy of any person, or maintained in a segregated fund for use in future political campaigns or activity related to preparing for future candidacy to elective office.

*The prohibition on the personal use of campaign funds does not apply to campaign funds received prior to July 15, 1988.

SCHEDULE A-1: CONTRIBUTIONS (other than In-Kind Contributions)

The following information must be provided for all contributors to your campaign during this reporting period, except for in-kind contributions. Information on in-kind contributions is reported on SCHEDULE A-2: IN-KIND CONTRIBUTIONS. In Column 1, check if the contributor is a political committee or a party committee. Any personal funds a candidate contributes to his campaign must be reported on this schedule. Personal funds a candidate loans to his campaign should be reported on Schedule B. For anonymous contributions, see SCHEDULE F. Totals and subtotals 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 Contributor	2. Contributions this Reporting Period		3. Total this Election
	a. Date(s)	b. Amount(s)	
PAUL R MADERE 616 Gordon Ave Harahan La (candidate) 70123	AS of 9/1/98	\$ 576 ⁶³	# 576 ⁶³
POLITICAL COMMITTEE? <input checked="" type="checkbox"/> PARTY COMMITTEE? <input checked="" type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
POLITICAL COMMITTEE? <input type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/>			
4. SUBTOTAL (this page)			N/A
5. TOTAL (complete only on last page of this schedule)			N/A
6. CONTRIBUTIONS FROM POLITICAL COMMITTEES:			
SUBTOTAL (this page) <u>576⁶³</u>		TOTAL (complete only on last page of this schedule) _____	

Form 102 Rev. 1988 Page Rev. 1988

SCHEDULE A-2: IN-KIND CONTRIBUTIONS

The following information must be provided for all in-kind contributions to your campaign having a monetary value in excess of \$25. In-kind contributions include the donation of tangible property, the use of tangible property, or the services of employees paid by a person other than the candidate or his business. In Column 1, check if the in-kind contributor is a political committee or a party committee. Any in-kind contributions a candidate makes to his own campaign must be reported here. Totals and subtotals 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 In-Kind Contributor	2. In-Kind Contributions this Reporting Period			3. Total this Election
	a. Description(s)	b. Date(s)	c. Value(s)	
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				<i>REVISED AS of 9-1-98</i>
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
POLITICAL COMMITTEE? _____ PARTY COMMITTEE? _____				
4. SUBTOTAL (this page)				N/A
5. TOTAL (complete only on last page of this schedule)				N/A
6. IN-KIND CONTRIBUTIONS FROM POLITICAL COMMITTEES:				
SUBTOTAL (this page) <u>0</u>			TOTAL (complete only on last page of this schedule) _____	

SCHEDULE A-3: OTHER RECEIPTS

Use this schedule to report those receipts that are not "contributions"; that is, monies paid to the campaign that are not given for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include interest or investment income. Receipts should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the receipt should state the reason the payment was made to the campaign.

1. Name and Address of Source	2. Other Receipts this Reporting Period		c. Amount(s)
	a. Date(s)	b. Explanation(s)	
			<i>Done AS of 9/1/98</i>
3. SUBTOTAL (optional)			
4. Total OTHER RECEIPTS during this reporting period			

Form 102, Rev. 1985, Page Rev. 5189

SCHEDULE B: LOANS RECEIVED

The following information must be provided for each loan or line of credit received this reporting period, even if it has been repaid. Also, complete this schedule for loans received in prior periods that are still outstanding. Separate loans must be reported separately, even if from the same source. Any personal funds a candidate loans to his campaign must be reported on this schedule.

1. Name and address of lender <div style="text-align: center; font-size: 1.2em; font-weight: bold; margin-top: 20px;">NONE AS OF 9-1-98</div>	2. a. Date* _____ b. Interest rate _____ % (a.p.r.) c. Amount borrowed* \$ _____ d. Balance due \$ _____ *For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____
--	--

3. Endorsers/Guarantors (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)	4. Repayments this period <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center;">Date</th> <th style="width: 35%; text-align: center;">Principal</th> <th style="width: 35%; text-align: center;">Interest</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"></td> <td></td> <td></td> </tr> </tbody> </table>	Date	Principal	Interest			
Date	Principal	Interest					

(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

1. Name and address of lender	2. a. Date* _____ b. Interest rate _____ % (a.p.r.) c. Amount borrowed* \$ _____ d. Balance due \$ _____ *For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____
-------------------------------	--

3. Endorsers/Guarantors (Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)	4. Repayments this period <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center;">Date</th> <th style="width: 35%; text-align: center;">Principal</th> <th style="width: 35%; text-align: center;">Interest</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"></td> <td></td> <td></td> </tr> </tbody> </table>	Date	Principal	Interest			
Date	Principal	Interest					

(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)

SCHEDULE C: DEBTS & OBLIGATIONS (OTHER THAN LOANS)

_____ DEBTS OWED BY THE CAMPAIGN

_____ DEBTS OWED TO THE CAMPAIGN

Use this schedule to report *either* debts owed by the campaign or debts owed to the campaign, checking the appropriate line above. If the campaign has experienced both types of debts, then copy this page and report them separately. Never combine debts owed by and debts owed to on the same page. Debts should be reported on this schedule until repaid. When repayments are made by the campaign, a corresponding entry should be made on SCHEDULE E-1: GENERAL EXPENDITURES. When repayments are received by the campaign, a corresponding entry should be made on SCHEDULE A-3: OTHER RECEIPTS.

1. Name and address of Creditor/Debtor	2. Outstanding Balance Beginning This Period	3. Amount(s) Incurred This Period (+)	4. Payment(s) Made This Period (-)	5. Outstanding Balance at Close of This Period
Reason Debt Incurred: NONE AS OF 0-1-98				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				
Reason Debt Incurred:				

SCHEDULE D: FUNDS LOANED

The following information must be provided for each loan or line of credit made this reporting period, even if it has been repaid. Also, complete this schedule for loans made in prior periods that are still outstanding. Separate loans must be reported separately, even if to the same borrower.

<p>1. Name and address of borrower</p> <p style="font-size: 1.5em; text-align: center; margin-top: 20px;">NONE AS OF 9-1-98</p>	<p>2. a. Date* _____ b. Interest rate _____ % (a.p.r.)</p> <p>c. Amount loaned* \$ _____</p> <p>d. Balance due \$ _____</p> <p><small>*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____</small></p>						
<p>3. Endorsers/Guarantors</p>	<p>4. Repayments this period</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center;">Date</th> <th style="width: 35%; text-align: center;">Principal</th> <th style="width: 35%; text-align: center;">Interest</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Date	Principal	Interest			
Date	Principal	Interest					
<p><small>(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)</small></p>	<p><small>(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)</small></p>						
<p>1. Name and address of borrower</p>	<p>2. a. Date* _____ b. Interest rate _____ % (a.p.r.)</p> <p>c. Amount loaned* \$ _____</p> <p>d. Balance due \$ _____</p> <p><small>*For lines of credit, give the date the line of credit was first committed at Item 2a and list only the amount actually drawn at Item 2c. OPTIONAL: Total amount of credit available \$ _____</small></p>						
<p>3. Endorsers/Guarantors</p>	<p>4. Repayments this period</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: center;">Date</th> <th style="width: 35%; text-align: center;">Principal</th> <th style="width: 35%; text-align: center;">Interest</th> </tr> </thead> <tbody> <tr> <td style="height: 150px;"> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Date	Principal	Interest			
Date	Principal	Interest					
<p><small>(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)</small></p>	<p><small>(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)</small></p>						

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)
American Signs 1500 Edwards Ave Suite B Harahan LA. 70123	8/23/98	Campaign signs	\$ 348 ⁰⁰
Reichart Plastics Inc. 5800-C Jackson Hwy Harahan La 70123	8/28/98	Stakes for campaign signs	\$ 24.47
Tom's Printing 1533 Edwards Ave Harahan La. 70123	8/31/98	Campaign flyers	204 ¹⁶
3. SUBTOTAL (optional)			
4. TOTAL (optional - complete only on last page of this schedule)			\$ 576.63

SCHEDULE E-2: OTHER DISBURSEMENTS

Use this schedule to report those disbursements that are not "expenditures"; that is, monies paid by the campaign that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. 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 campaign.

1. Name and Address of Recipient	2. Other Disbursements this Reporting Period		
	a. Date(s)	b. Explanation(s)	c. Amount(s)
<i>NONE as of 9/1/98</i>			
3. SUBTOTAL (optional)			
4. Total OTHER DISBURSEMENTS during this reporting period			

SCHEDULE F: ANONYMOUS CONTRIBUTIONS

Anonymous contributions *must be transmitted to the State*—they cannot be kept or used. On this schedule, state the date and amount of each anonymous contribution received during this reporting period, as well as the date that each contribution was transmitted to the State. Receipts from the sale of campaign paraphernalia (items such as political campaign pins, buttons, hats, T-shirts, bumper stickers, literature, etc.) in transactions of \$25 or less are not considered anonymous contributions.

Anonymous contributions should be mailed by campaign check to the Treasurer of the State of Louisiana, accompanied with an explanation that the check represents an anonymous campaign contribution forwarded pursuant to LSA-R.S. 18:1505.2B.

1. Amount	2. Date Received	3. Date Transmitted to State
	9/1/98	

Mail* or hand deliver completed reports to:

**CAMPAIGN FINANCE
8401 UNITED PLAZA BLVD., SUITE 200
BATON ROUGE, LA 70809-7017**

*Mailed reports will be considered to have been filed on the date they are postmarked or receipted on a return receipt requested form
by the United States Post Office.

FOR MORE INFORMATION CALL: (225) 922-1400

The failure to file campaign finance reports on time subjects candidates and the chairmen and treasurers of their committees to civil penalties.



American Signs

SINCE 1949

(504) 734 8166
New Orleans
(504) 882-5752
Northshore
(504) 731-8166
Fax

- INVOICE
 WORK ORDER
 PRICE QUOTE

Date: 1 / 1 Salesman: _____
Customer: JAVL MADERE Purchase Order: _____
Address: _____ Contact Name: _____
City: _____ State: _____ Zip: _____ Phone No.: _____ Fax No.: _____

SPECIAL INSTRUCTIONS: Quantity _____ Size _____ Material _____

(50) 24" X 32" COROPLAST SIGNS
(25 SINGLE FACE)
(25 DOUBLE FACE)

Paid in full

File Name _____ Drive _____

METHOD OF PAYMENT: other

CASH

CHECK # _____ Account Number _____

CHARGE _____ Expiration Date _____

AMOUNT \$ _____ Authorized Signature _____

Installation instructions:

Delivery instructions:

Work Authorized By _____ Title _____ Date _____

"WE MANUFACTURE ALL TYPES OF QUALITY SIGNS AT COMPETITIVE PRICES. SINCE 1949..."

Parent Co:
American Signs
1500 Edwards Avenue
Suite B
Harahan, LA 70123

Thank You!

Subtotal	320 ⁰⁰
% Sales Tax	28 ⁰⁰
Delivery Charge	
TOTAL	348 ⁰⁰
Deposit	312 ³²
Balance Due	35 ⁶⁸

PACKING SLIP



Piedmont Plastics, Inc.
Piedmont Polymers, Inc.

C.O.D. SHIPMENT
 Collect On Delivery \$ _____
 REMIT TO:
PIEDMONT PLASTICS, INC.
 POST OFFICE BOX 80802
 CHARLOTTE, NC 28260
 C.O.D. charge to collect? Yes No
 Consignee

AGENTS NO. _____

OFFICE COPY

DATE	DESCRIPTION	AMOUNT

Customer to be advised if C.O.D. is not collectible. If not collectible, it is to be returned to the originator within 30 days of the date of shipment. If not returned, it will be disposed of as per the instructions on the invoice. The carrier shall not be responsible for the return of the goods if they are not returned to the originator.

(Signature of carrier) _____

If charges are to be prepaid, write as above on "To Be Prepaid".

Received \$ _____ by the payment of the charges on the property described herein.

Agent's Name _____

For _____ (The undersigned hereby agrees to accept the charges and costs.)

PIEDMONT PLASTICS, INC.

Shipper, Per _____

Agent, Per _____

BHP PREPAID OR C.O.D. (F.O.I.)

ORDER NO JJ08789	CUSTOMER NO 1199999	Model or 1 C/O (SHIPPER)
DATE ORDERED 08/28/98	DATE RECEIVED 08/28/98	
PURCHASE DESCRIPTION VERBAL	IS SPECIAL P/U P/U	
PLACEMENT VERBAL	TERMS CASH	

TERMINAL NO. 504-734-0640 EXT. NO. 504-734-5354
 PHONE NO. 1-703- (extn.)
 FAX NUMBER
 Printed: Fri, 08/28/98 04:30

SHIP TO ORDER
 PIEDMONT PLASTICS INC.
 5800-G Jefferson Highway
 Harahan, LA 70123

SOUL TOX
 CASH SALE ACCOUNT
 5800-G JEFFERSON HWY
 HARRAHAN, LA 70123
 SPECIAL INSTRUCTIONS FOR THIS ORDER
Paul Macklin 2447

BHP TOX
 CASH SALE ACCOUNT
 5800-G JEFFERSON HWY
 HARRAHAN, LA 70123
 For help call: MARGARET DASTAGNA
 HHHKRRRRR D, D, KKKKKRRRR
 ORIGIN VENDOR

LINE	QTY	UNIT	PART NUMBER/DESCRIPTION	SHIPPED	BACKORDERED	UNIT PRICE	AMOUNT
1	26	EA	FRAMESTEPAKE 2 WIRE STEP STAKE 610N HONIER	<input checked="" type="checkbox"/>		0.900 EA	23.50

Paul Macklin

MATERIAL TOTAL	LABOR TOTAL	SHIPPING	TAXABLE TOTAL	TAX	ORDER TOTAL
27.50	0.00	0.00	22.50	1.97	24.47

SOUTHWEST INTERIOR INC. CHARLOTTE, NC 28221 (704) 371-6200 Main Phone (704) 371-1100 Fax (704) 371-1100 (704) 371-6200 STROPLEWOOD DRIVE RALEIGH, NC 27603	ZION TRUCK CENTER SERVICE 1400 W. W. TR. RD (704) 371-1001 #4000 S. HUNTER PIKE HARRAHAN, LA 70123 (504) 885-0001 NEW HAVEN OFFICE 1300 W. 9000 FT. ROAD ONE WILLOW SQUARE (504) 796-0001	DONOVAN MOTOR SERVICE 22 INDUSTRIAL PARKWAY WARRIOR, LA 70092 (504) 496-7700 KAY WEST CONCRETE INC. 615 W FOURTH STREET, SUITE 504 478-4701 BIRD DOUGLAS ROAD PETERSBURG, VA 23134 (804) 751-4011	SAPII INTERIOR SERVICE LAWRENCEVILLE, GA 30046 (770) 962-8800 WESTBURY FLOORING & TILE 11430-114 2000-0100 (770) 956-8900 THE CERAMIC GROUP CHARLOTTE, CAROLINA (704) 755-8200	Found in good condition: _____ Date: _____ Worked by: <i>LT</i> Date: <i>8/28</i> Checked by: _____ Date: _____
---	--	--	--	--

NO CLAIMS SHALL BE MADE AGAINST THE CARRIER OR GOODS, BECAUSE THEY ARE NOT RETURNED WITHOUT PROPER APPROVAL. CLAIMS FOR PAYMENT LOSS OR DAMAGE MUST BE FILED BY CARRIER'S AGENT DATA.

Tom's PRINTING

ELMWDD BUSINESS PARK
1533 Edwards Avenue • Harahan, LA 70123
Phone (504) 733-0903 • FAX (504) 733-4532
e-mail: Toms0903@aol.com

INVOICE	
No 6613 (2)	Date 06/31/98

To: PAUL
PAUL A. MADERA

941-7005

ACCT. NO.	ORDERED BY	PHONE	YOUR ORDER NO	PREPARED BY	SALES REP	SHIPPED VIA
31	PAUL	250-5432		Gail	house	Pickup

QUANTITY	DESCRIPTION	SIZE	ORIG	UNIT PRICE	AMOUNT
3,000	Flyer 8.5 x 11, 20# White, 1 Color / 1 Color Blind		1		

March 2000

Please pay from this invoice.
Finance Charge: 1.54 per month.

Subtotal	187.73
Shipping	
Postage	
Tax @ 8.75%	16.43
TOTAL	204.16
Payment	204.16

PAID IN FULL. THANK YOU.

Received by: *Paul Madera* Date: *8/31/98*

Tom's Printing, Inc. * PHONE (504) 733-0903 * FAX (504) 733-4532
WE PRINT FOR YOUR SUCCESS