

CANDIDATE'S REPORT

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

| | | | |
|---|---|---|---|
| 1. Qualifying Name and Address of Candidate DET KEANEY 201 S. HOULY ST HAMMOND LA 70403 | | 2. Office Sought (Include title of office as well as parish, city, town and/or election district. CITY COUNCIL DISTRICT 2 City of Hammond | OFFICE USE ONLY Supp 10/98 12/8 985288 REC'D NOV 11 1998 |
| 3. Date of Primary <u>Oct 3, 1998</u> This report covers from _____ through _____ | | | |
| 4. Type of Report: <input type="checkbox"/> 180th day prior to primary <input type="checkbox"/> 40th day after general <input type="checkbox"/> 90th day prior to primary <input type="checkbox"/> Annual (future election) <input type="checkbox"/> 30th day prior to primary <input type="checkbox"/> Supplemental (past election) <input type="checkbox"/> 10th day prior to primary <input type="checkbox"/> 10th day prior to general <input checked="" type="checkbox"/> Amendment to prior report | | | |
| 5. FINAL REPORT IF: <input type="checkbox"/> Withdrawn <input type="checkbox"/> Filed after the election AND all loans and debts paid <input type="checkbox"/> Unopposed | | | |
| 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.) | 7. Full Name and Address of Treasurer SAC-ACCOMANDO 1201 S. CAESAR HAMMOND LA 70403 | B. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY a. Name and address of principal campaign committee | |
| 9. Name of Person Preparing Report <u>DET KEANEY</u> Daytime Telephone <u>(504) 345-8766</u> | b. Name and address of committee's chairperson | | |
| 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 <u>9th</u> day of <u>December</u> 19 <u>98</u> . | | c. Name and address of all subsidiary committees, if any (Use additional sheets if necessary) | |
| Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee) Det Keaney | | Daytime Telephone (504) 345-8766 | |
| Signature of Treasurer _____ | | Daytime Telephone _____ | |

SUMMARY PAGE

| RECEIPTS | This Period |
|---|-------------|
| 1. Contributions (Schedule A-1) | 100.00 |
| 2. In-kind Contributions (Schedule A-2) | |
| 3. Campaign paraphernalia sales of \$25 or less | |
| 4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3) | |
| 5. Other Receipts (Schedule A-3) | 100.00 |
| 6. Loans Received (Schedule B) | |
| 7. Loan Repayments Received (Schedule D) | |
| 8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7) | |

| DISBURSEMENTS | This Period |
|---|-------------|
| 9. Expenditures (Schedule E-1) | 240.00 |
| 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) | |

| 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> | 197.70 |
| 15. Plus total receipts this period <small>(Line 8 above)</small> | 200.00 |
| 16. Less total disbursements this period <small>(Line 13 above)</small> | 240.00 |
| 17. Less in-kind contributions <small>(Line 2 above)</small> | |
| 18. Funds on hand at close of reporting period | 157.70 |

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.) | |
| 20. Of funds on hand at close of reporting period (Line 18, above), amount held in investments | |

| 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.) | |
| 22. Contributions received from political committees (From Schedules A-1 and A-2) | 100.00 |
| 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.) | |
| 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.) | |
| 25. Expenditures from petty cash fund (Must also be reported on Schedule E-1.) | |

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) | |
| TANGIPAHOLA DEMOCRATIC PARTY AMITE, LA POLITICAL COMMITTEE? <input checked="" type="checkbox"/> PARTY COMMITTEE? <input type="checkbox"/> | 11/98 | 100-- | 100-- |
| 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) | | | 100-- |
| TOTAL (complete only on last page of this schedule) | | | |

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 |
|---|--|---------------------------------------|------------------------------------|--|
| THE DAILY STAR Reason Debt Incurred: | | 474.07 377 | 200.00 | 274.07 |
| PREMIER PRINTING Reason Debt Incurred: | | 382.27 | | 382.27 |
| Reason Debt Incurred: | | | | |
| Reason Debt Incurred: | | | | |
| Reason Debt Incurred: | | | | |
| Reason Debt Incurred: | | | | |
| Reason Debt Incurred: | | | | |
| Reason Debt Incurred: | | | | |

PREMIER

Press & Graphics, Inc.

December 1, 1998

Statement As of November 30, 1998

| Type | Date | Num | Name | Due Date | Open Balance |
|----------------|---------|------|----------------|----------|---------------|
| Current | | | | | |
| Total Current | | | | | |
| 1 - 30 | | | | | |
| Total 1 - 30 | | | | | |
| 31 - 60 | | | | | |
| Total 31 - 60 | | | | | |
| 61 - 90 | | | | | |
| Invoice | 9/15/98 | 3214 | Dorothy Kenney | 9/15/98 | 305.97 |
| Invoice | 9/30/98 | 3281 | Dorothy Kenney | 9/30/98 | 76.30 |
| Total 61 - 90 | | | | | 382.27 |
| > 90 | | | | | |
| Total > 90 | | | | | |
| TOTAL | | | | | <u>382.27</u> |

ADVERTISING INVOICE AND STATEMENT

DAILY STAR
725 SOUTH MORRISON BLVD.
HARRARD, LOUISIANA 70403
PHONE 504-345-2333

| | |
|---|--------------------|
| 1 | PERMIT/NO. ADDRESS |
| DAILY STAR P.O. BOX 1149 HARRARD, LA 70404-1149 | |

| | | | |
|--------------------------|-------------------------|-------------|-----------------------|
| 2 | INVOICE/DOCUMENT NUMBER | 4 | BILLING DATE |
| 98100322 | | 10/31/98 | |
| 3 BILLING PERIOD | | | |
| 10/01/98 THRU 10/31/98 | | | |
| 7 | BILLED/ACCOUNT NUMBER | 8 | ADVERTISER/CLIENT NO. |
| 4-45436 005 | | | |
| 6 ADVERTISER/CLIENT NAME | | | |
| | | | |
| REMITTANCE AMOUNT | | PAGE NUMBER | |
| | | 1 | |

| | |
|--|---------------------------------|
| 9 | BILLED ACCOUNT NAME AND ADDRESS |
| BOB KENNEY 201 1/2 S HOLLY ST HARRARD, LA 70403-4345 | |

Due to current postal regulations, please remit all payments to the address shown in box 1 above. And to help us properly post your payment, please return this portion of your bill with your remittance or write your account# (as shown in box 7 above) on your check. Thank you.

PLEASE DETACH AND RETURN WITH YOUR REMITTANCE

| 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
|----------|--|--|--------------------------|-------------------|--------------|------------|----|----|----|----|----|
| DATE | NEWSPAPER'S REFERENCE ID | DESCRIPTION (OTHER CHARGES/CREDITS) | SAU SIZE BILLED UNITS | TIMES RUN RATE | GROSS AMOUNT | NET AMOUNT | | | | | |
| 10/02/98 | PRIOR BALANCE DISPLAY-Daily Star 006185001 -005 | DS | 3.0 X 3.00 9.00" | 1 10.81 | 97.29 | 97.29 | | | | | |
| | | LATE PAYMENT CHARGE | | | 5.57 | 5.57 | | | | | |
| | | LAST TIME | | | | | | | | | |

STATEMENT OF ACCOUNT

| | | | | | | | | | | | |
|----|---------------------|----|--------|----|--------------------------------------|----|------------------|----|------------------|----|------------------|
| 21 | CURRENT BALANCE DUE | 22 | PAID | 23 | AGING OF PAST DUE AMOUNTS 60 DAYS | 24 | 90 DAYS AND OVER | 25 | UNAPPLIED CREDIT | 26 | TOTAL AMOUNT DUE |
| | 102.86 | | 371.21 | | .00 | | .00 | | | | 474.07 |

*UNAPPLIED CREDITS ARE INCLUDED IN TOTAL BALANCE

DAILY STAR - 725 SOUTH MORRISON BLVD., HARRARD, LOUISIANA 70403

| | | | | | | | |
|----|------|----|---------------------------------|----|------------|----|------------|
| 24 | TYPE | 25 | CONTRACT PERFORMANCE EXPIRES | 26 | THIS MONTH | 27 | CUMULATIVE |
| | | | | | | | |

| | |
|------------------------|------------------------|
| 28 | ADVERTISER INFORMATION |
| 98100322 | |
| 10/01/98 THRU 10/31/98 | |
| 4-45436 | |

| | |
|---|------------------|
| 29 | TERMS OF PAYMENT |
| DUE UPON RECEIPT | |
| ----- | |
| PRIOR BALANCE SUBJECT TO LATE PAYMENT CHARGE | |