

# REPORT FOR PROPOSITION/RECALL ELECTIONS

(filed by persons/committees that support or oppose one or more propositions or recall elections)

1. Full Name and Address of Person/Committee

**OFFICE USE ONLY**

2. Date of Election \_\_\_\_\_

This report covers from \_\_\_\_\_ through \_\_\_\_\_

3. Type of Report:

\_\_\_\_ 45<sup>th</sup> day after filing petition      \_\_\_\_ 40<sup>th</sup> day after election  
\_\_\_\_ 135<sup>th</sup> day after filing petition      \_\_\_\_ Supplemental  
\_\_\_\_ 200<sup>th</sup> day after filing petition  
\_\_\_\_ 30<sup>th</sup> day prior to election      \_\_\_\_ Amendment to prior report  
\_\_\_\_ 10<sup>th</sup> day prior to election

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

| a. <u>Name</u> | b. <u>Position</u> | c. <u>Address</u> |
|----------------|--------------------|-------------------|
|                | Chairperson        |                   |
|                | Treasurer          |                   |

5. Propositions or Recalls Supported or Opposed (use additional sheets if necessary)

| a. <u>Description of Proposition/ Name of person subject of recall election</u> | b. <u>Office Sought</u> | c. <u>Political Party</u> |
|---|-------------------------|---------------------------|
|   |                         |                           |
|   |                         |                           |
|   |                         |                           |

d. Support/Oppose

6. a. Name of Person Preparing Report

b. Daytime Telephone

7. 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 \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Person/Committee Chairperson

\_\_\_\_\_  
Daytime Telephone

\_\_\_\_\_  
Signature of Committee Treasurer, if any

\_\_\_\_\_  
Daytime Telephone

## SUMMARY PAGE

| <b>RECEIPTS</b>                                  | 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. <b>TOTAL CONTRIBUTIONS</b> (Lines 1 + 2 +3)   |             |
| 5. Other Receipts (Schedule A-3)                 |             |
| 6. Loans Received (Schedule B)                   |             |
| 7. Loan Repayments Received (Schedule D)         |             |
| 8. <b>TOTAL RECEIPTS</b> (Lines 4 + 5 + 6 + 7)   |             |

| <b>DISBURSEMENTS</b>                                     | This Period |
|--|-------------|
| 9. General Expenditures (Schedule E-1)                   |             |
| 10. In-Kind Expenditures (Schedule E-2)                  |             |
| 11. <b>TOTAL EXPENDITURES</b> (Lines 9 + 10)             |             |
| 12. Other Disbursements (Schedule E-3)                   |             |
| 13. Loan Repayments Made (Schedule B)                    |             |
| 14. Funds Loaned (Schedule D)                            |             |
| 15. <b>TOTAL DISBURSEMENTS</b> (Lines 11 + 12 + 13 + 14) |             |

| <b>FINANCIAL SUMMARY</b>  | Amount |
|---|--------|
| 16. Funds on hand at beginning of reporting period<br><small>(Must equal funds on hand at close from last report or -0- if first report for this committee)</small> |        |
| 17. <i>Plus</i> total receipts this period ( <i>less</i> in-kind contributions received)<br><small>(Line 8 above minus line 2 above)</small>                        |        |
| 18. <i>Less</i> total disbursements this period ( <i>less</i> in-kind expenditures)<br><small>(Line 15 above minus line 10 above)</small>                           |        |
| 19. Funds on hand at close of reporting period  |        |

## SUMMARY PAGE (continued)

| <b>INVESTMENTS</b>   | Amount |
|--|--------|
| 20. Of funds on hand at beginning of reporting period (Line 16, above), amount held in investments<br>(i.e., savings accounts, CD's, money market funds, etc.) |        |
| 21. Of funds on hand at close of reporting period (Line 19, above), amount held in investments   |        |

| <b>SPECIAL TRANSACTIONS</b>   | This Period |
|---|-------------|
| 22. All proceeds from the sale of tickets to fundraising events<br>(Receipts from the sale of tickets are contributions and must also be reported on Schedule A-1)                        |             |
| 23. Proceeds from the sale of campaign paraphernalia<br>(Receipts from the sale of campaign paraphernalia are contributions and must also be reported<br>on Schedule A-1 or Line 3 above) |             |
| 24. Expenditures from petty cash fund<br>(Must also be reported on Schedule E-1)  |             |

Form 300, Rev. 7/01. Page Rev. 7/01.

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

The following information must be provided for all contributions **received** during this reporting period, except for in-kind contributions. Information on in-kind contributions is reported on SCHEDULE A-2: IN-KIND CONTRIBUTIONS. For anonymous contributions, see SCHEDULE F. Totals and subtotals at bottom of the 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 Contributor  | 2. Contributions this Reporting Period |   | 3. Total this Year |
|---|--|---|--------------------|
|   | a. Date(s)                             | b. Amount(s)  |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |  |   |                    |
| 4. SUBTOTAL (this page)   |  |   | N/A                |
| 5. TOTAL (complete only on last page of this schedule)                        |  |   |                    |
| 6. CONTRIBUTIONS FROM POLITICAL COMMITTEES ONLY:                              |  |   |                    |
| SUBTOTAL (this page) _____  |  | TOTAL (complete only on last page of this schedule) _____ |                    |

## SCHEDULE A-2: IN-KIND CONTRIBUTIONS RECEIVED

The following information must be provided for all in-kind contributions **received** during this reporting period. In-kind contributions **made** (i.e. in-kind expenditures) are reported on SCHEDULE E-2: IN-KIND EXPENDITURES. For anonymous contributions see SCHEDULE F. Totals and subtotals at bottom of the 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 In-Kind Contributor                                    | 2. In-Kind Contributions Received this Reporting Period |            |   | 3. Total this Year |
|---|---|------------|---|--------------------|
|   | a. Description(s)                                       | b. Date(s) | c. Value(s)   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| POLITICAL COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO |   |            |   |                    |
| 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) _____  |   |            | TOTAL (complete only on last page of this schedule) _____ |                    |

## SCHEDULE A-3: OTHER RECEIPTS

This schedule is used to report those receipts that are not "contributions"; that is, monies received that are not paid for the purpose of supporting or opposing propositions or questions submitted to the voters. 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.

| 1. Name and Address of Source                        | 2. Explanation | 3. Date | 4. Amount |
|--|----------------|---------|-----------|
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
|  |                |         |           |
| 4. Total OTHER RECEIPTS during this reporting period |                |         |           |

## 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.

| 1. Name and address of lender   | 2. a. Date* _____ b. Interest rate _____%(a.p.r.)<br>c. Amount borrowed* ..... \$ _____<br>. Balance due ..... \$ _____<br><br>*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.<br>OPTIONAL: Total amount of credit available \$ _____  |          |           |          |  |  |  |
|---|--|----------|-----------|----------|--|--|--|
| 3. Endorsers/Guarantors   | 4. Repayments this period<br><table style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <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.) | (List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)  |          |           |          |  |  |  |

| 1. Name and address of lender   | 2. a. Date* _____ b. Interest rate _____%(a.p.r.)<br>c. Amount borrowed* ..... \$ _____<br>. Balance due ..... \$ _____<br><br>*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.<br>OPTIONAL: Total amount of credit available \$ _____  |          |           |          |  |  |  |
|---|--|----------|-----------|----------|--|--|--|
| 1. Endorsers/Guarantors   | 4. Repayments this period<br><table style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <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.) | (List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)  |          |           |          |  |  |  |

# 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 *or* debts owed to the person/committee, checking the appropriate line above. If both types of debts exist, 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 a corresponding entry should be made on SCHEDULE E-1: GENERAL EXPENDITURES. When repayments are received 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:                  |  |                                       |                                    |  |
| 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 made this reporting period, whether made to candidates or others, with committee funds, even if the loan 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 the loans are made to the same borrower.

|                                 |   |
|---------------------------------|---|
| 1. Name and address of borrower | 2. a. Date* _____ b. Interest rate _____%(a.p.r.)<br>c. Amount loaned* ..... \$ _____<br>. Balance due ..... \$ _____<br><br>*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.<br>OPTIONAL: Total amount of credit available \$ _____ |
|---------------------------------|---|

|                         |                           |           |          |
|-------------------------|---------------------------|-----------|----------|
| 3. Endorsers/Guarantors | 4. Repayments this period |           |          |
|                         | 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.)

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

|                                 |   |
|---------------------------------|---|
| 1. Name and address of borrower | 2. a. Date* _____ b. Interest rate _____%(a.p.r.)<br>c. Amount loaned* ..... \$ _____<br>. Balance due ..... \$ _____<br><br>*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.<br>OPTIONAL: Total amount of credit available \$ _____ |
|---------------------------------|---|

|                         |                           |           |          |
|-------------------------|---------------------------|-----------|----------|
| 3. Endorsers/Guarantors | 4. Repayments this period |           |          |
|                         | 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.)

(List payments of principal and interest separately. If separate amounts are not known, list all payments under principal.)

## SCHEDULE E-1: GENERAL EXPENDITURES

Use this schedule to report information on most committee expenditures, during this reporting period. **However, in-kind expenditures should be reported on SCHEDULE E-2 and should not be reported on this schedule.** An "expenditure" is any payment made for the purpose of supporting or opposing a proposition or question submitted to the voters. Expenditures include monies spent for general operating expenses. Any payments made that are not "expenditures" should be reported on SCHEDULE E-4: OTHER DISBURSEMENTS. Totals and subtotals at bottom of page are *optional* but will assist in completing the Summary Page.

| 1. Name and Address of Recipient                                  | 2. Expenditures this Reporting Period |               |              |
|---|---------------------------------------|---------------|--------------|
|   | a. Date(s)                            | b. Purpose(s) | c. Amount(s) |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
|   |                                       |               |              |
| 3. SUBTOTAL (optional)  |                                       |               |              |
| 4. TOTAL (optional - complete only on last page of this schedule) |                                       |               |              |

## SCHEDULE E-2: IN-KIND EXPENDITURES

The following information must be provided for all in-kind expenditures **made** during this reporting period. In-kind contributions **received** by the committee are reported on SCHEDULE A-2: IN-KIND CONTRIBUTIONS RECEIVED. In Column 1, give the name and address of the recipient of the expenditure. Totals and subtotals at bottom of the 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. In-Kind Expenditures Made this Reporting Period |               |              |
|---|--|---------------|--------------|
|   | a. Date(s)   | b. Purpose(s) | c. Amount(s) |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
|   |  |               |              |
| 3. SUBTOTAL (optional)  |  |               |              |
| 4. TOTAL (optional - complete only on last page of this schedule) |  |               |              |



## 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 to the Treasurer of the State of Louisiana, accompanied with an explanation that the check represents an anonymous contribution forwarded pursuant to LSA-R.S. 18:1505.2B.

| 1. Amount | 2. Date Received | 3. Date Transmitted to State |
|-----------|------------------|------------------------------|
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |
|           |                  |                              |

Mail completed reports to\*:

**CAMPAIGN FINANCE  
POST OFFICE BOX 4368  
BATON ROUGE, LA 70821**

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

**FOR MORE INFORMATION VISIT THE WEBSITE:  
[www.ethics.state.la.us](http://www.ethics.state.la.us)**

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