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(filed by committees that support or oppose one or more candidates and/or propositions and that are not candidate committees)

· · · · · · · · · · · · · · · · · · ·	• •			,
1. Full Name and Address of Political Committee			OFFICE US	E ONLY
ACADIAN AMBULANCE EMPLOYEES POLIT	TICAL ACTION C	OMMITTEE	Report Number: 65	575
PO BOX 98000 LAFAYETTE, LA 70509			Date Filed: 8/10/201	7
,			Report Includes Sched	575 7 ules:
2. Date of Primary 11/2/2018			Schedule B	
	4b manuals - 7 (0.1/0.0.17	Schedule E-3 Schedule E-4	
This report covers from 7/1/2017	through <u>7/;</u>	31/2017		
3. Type of Report:				
180th day prior to primary	40th day afte	er general		
90th day prior to primary	Annual (futu	re election)		
30th day prior to primary	X Monthly			
10th day prior to primary				
10th day prior to general	Amendment	t to prior		
4. All Committee Officers (including Chairperson, Treasur	er, if any, and any oth	her committee officers)		
a. <u>Name</u> b.	<u>Position</u>	c. Address		
ALLYSON F PHARR	Chairperson	101 Bonner Dr		
		Lafayette, LA 70508	3	
ERIN LEBLANC	Treasurer	214 Hidden Grove F	Place	
		Lafayette, LA 70503	3	
5. Candidates or Propositions the Committee is Supporting	g or Opposing (use a			
a. Name & Address of Candidate/Description of Propo	sition	b. Office Sought	c. Political Party	d. Support/Oppose
On attached sheet				
6. Is the Committee supporting the entire ticket of a politic	al party?	Yes No	o If "yes", which party?	
				
	LEBLANC			
b. Daytime Telephone (337)291-4030		Market along the date of the con-		
WE HEREBY CERTIFY that the information contained information and belief, and that no expenditures have been	n made nor contribut	ions received that have not be		
required to be reported by the Louisiana Campaign Finan	ce Disclosure Act has	s been deliberately omitted .		
This 10th day of August	, 2017			
		_		
Allyson F Pharr			(000)000-0000	
Signature of Committee/Chairperson			Daytime Telephone	
Erin LeBlanc			(000)000-0000	
Signature of Committee Treasurer, if any	,		Daytime Telephone	

Form 202, Rev. 3/98, Page Rev. 5/01

5. Candidates or Propositions the Committee is Supporting or Opposing (use additional sheets if necessary)

a. Name & Address of Candidate/Description of Proposition

b. Office Sought

c. Political Party

d. Support/Oppose

CRAIG GREENE 8080 Bluebonnet Boulevard Public Service Commissioner

Republican

an Support

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	\$ 0.00
2. In-kind Contributions (Schedule A-2)	\$ 0.00
3. Campaign paraphernalia sales of \$25 <i>or less</i>	\$ 0.00
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +3)	\$ 0.00
5. Other Receipts (Schedule A-3)	\$ 0.00
6. Loans Received (Schedule B)	\$ 0.00
7. Loan Repayments Received (Schedule D)	\$ 0.00
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	\$ 0.00

DISBURSEMENTS	This Period
9. General Expenditures (Schedule E-1)	\$ 0.00
10. In-Kind Expenditures (Schedule E-2)	\$ 0.00
11. Contributions made to Candidates (Schedule E-3)	\$ 2,500.00
12. TOTAL EXPENDITURES (Lines 9 + 10 + 11)	\$ 2,500.00
13. Other Disbursements (Schedule E-4)	\$ 36.60
14. Loan Repayments Made (Schedule B)	\$ 0.00
15. Funds Loaned (Schedule D)	\$ 0.00
16. TOTAL DISBURSEMENTS (Lines 12 + 13 + 14 + 15)	\$ 2,536.60

FINANCIAL SUMMARY	Amount	
17. 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)	\$ 6,769.43	
18. <i>Plus</i> total receipts this period (<i>less</i> in-kind contributions received) (Line 8 above minus line 2 above)	\$ 0.00	
19. Less total disbursements this period (less in-kind expenditures) (Line 16 above minus line 10 above)	\$ 2,536.60	
20. Funds on hand at close of reporting period	\$ 4,232.83	

Form 202, Rev. 3/98, Page Rev. 3/98

SUMMARY PAGE (continued)

INVESTMENTS	Amount
21. Of funds on hand at beginning of reporting period (Line 17, above), amount held in investments (i.e., savings accounts, CD's, money market funds, etc.)	\$ 0.00
22. Of funds on hand at close of reporting period (Line 20, above), amount held in investments	\$ 0.00

SPECIAL TRANSACTIONS	This Period	
23. Contributions received from political committees (From Schedules A-1 and A-2)	\$ 0.00	
24. 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)	\$ 0.00	
25. 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)	\$ 0.00	
26. Expenditures from petty cash fund (Must also be reported on Schedule E-1)	\$ 0.00	

NOTICE

A political committee must register in each calendar year in which it will have over \$500 of financial activity. The registration is accomplished by filing a Statement of Organization form and paying the \$100 filing fee. Statements of Organization are filed annually by January 31. Any committee which realizes that it will have over \$500 of financial activity after January 31 must register within ten days of its realization of that fact. However, if this occurs during the ten day period prior to an election the Statement of Organization must be filed within three days.

Political committees must file reports of receipts and disbursements on an annual basis. Annual reports are due by February 15 and should cover the preceding calendar year. Also, committees must file reports of receipts and disbursements on the same schedule as the candidates it supports or opposes. Reports are also due in connection with propositions (ballot issues) the committee supports or opposes. Schedules of reporting and filing dates for all elections are available from the Campaign Finance Office.

Form 202, Rev. 3/98, Page Rev. 3/00

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* 3/4/2011 b. Interest rate

Name and address of lender	2. a. Date*3/4	1/2011 b. Interest ra	te <u>4.00</u> %(a.p.r.)	
ACADIAN AMBULANCE INC.	c. Amount borrowe	d*	\$20.000.00	
PO Box 98000 Lafayette, LA 70509				
Lalayelle, LA 70309				
		e the date the line of credit the amount actually drawr		
	•	ount of credit available \$	ratitem 20.	
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
3. Endorsers/Guarantors	Repayments this pe Date	riod Principal	Interest	
	Bato	Типограг	mercot	
(Enter the full name and address of each person or entity that has	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	al and interest separately. If se	parate amounts are not	
endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)	known, list all payments ι	ınder principal.)		
Name and address of lender	2. a. Date* 9/9	9/2011 b. Interest ra	ate 4.00 %(a.p.r.)	
ACADIAN AMBULANCE INC.		d*		
PO Box 98000 Lafayette, LA 70509				
Larayotto, LA 70003				
	*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.			
	•	ount of credit available \$		
3. Endorsers/Guarantors	4. Repayments this pe	riod	<u> </u>	
ACADIAN AMBULANCE INC.	Date	Principal	Interest	
PO Box 98000				
Lefevette LA 70500				
Lafayette, LA 70509 Liability: \$ 0.00				
(Enter the full name and address of each person or entity that has	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	al and interest separately. If se	parate amounts are not	
endorsed, guaranteed or otherwise secured the loan or line of credit. Also, state the amount of liability for each endorser or guarantor.)	known, list all payments ι	inder principal.)		
Name and address of lender	2. a. Date* 8/3	1/2011 b. Interest ra	ate 4.00 %(a.p.r.)	
ACADIAN AMBULANCE INC.	c. Amount borrowe	 d*		
PO Box 98000 Lafayette, LA 70509 d. Balance due			· · · · · · · · · · · · · · · · · · ·	
	*For lines of credit, give the date the line of credit was first commit			
	_	e the date the line of credit the amount actually drawr		
	-	ount of credit available \$		
3. Endorsers/Guarantors	4. Repayments this pe	4. Repayments this period		
	Date	Principal	Interest	
(Enter the full name and address of each parson or estitution to	/Light payments of princip	al and interest concretely. If	parata amaunta ara sat	
(Enter the full name and address of each person or entity that has endorsed, guaranteed or otherwise secured the loan or line of credit.	known, list all payments u	al and interest separately. If se under principal.)	varate amounts are not	
Also, state the amount of liability for each endorser or guarantor.)		•		

SCHEDULE E-3: CONTRIBUTIONS MADE TO CANDIDATES

The following information must be provided for direct contributions made to candidates or their campaign committees, during this reporting period, except for in-kind expenditures. All candidates listed on this schedule should also be listed on the Cover Page in Item 5. Report all in-kind expenditures, including those made to candidates, on SCHEDULE E-2: IN-KIND EXPENDITURES. 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.

Name and Address of Recipient Candidate 2. Contributions Made thi a. Date(s)		s Reporting Period b. Amount(s)
CRAIG GREENE 8080 Bluebonnet Boulevard Baton Rouge, LA 70810	07/21/2017	\$ 2,500.00
3. SUBTOTAL (optional)		\$ 2,500.00
4. TOTAL (optional - complete only on last page of this schedule)		\$ 2,500.00

Form 202, Rev. 3/98, Page Rev. 3/98

SCHEDULE E-4: OTHER DISBURSEMENTS

This schedule is used to report those disbursements that are not "expenditures"; that is, monies paid by the committee that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office or supporting or opposing a proposition or question submitted to the voters. 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 committee.

1. Name and Address of Recipient	2. Date	3. Explanation	4. Amount
JP MORGAN CHASE PO Box 260161 Baton Rouge, LA 70826	07/17/2017	Bank Service Charge	\$ 36.60
5. Total OTHER DISBURSEMENTS during this reporting period			\$ 36.60

Form 202, Rev. 3/98, Page Rev. 3/98