CANDIDATE'S REPORT (to be filed by a candidate or his principal campaign committee)				
1.Qualifying Name and Address of Candidate	Office Sought (Include title of office as well as parish, city, town and/or election district.)	OFFICE USE ONLY		
Willie Bradford	Shreneport City			
3026 Independence Au		Aun 2017		
Shreveport, LA 7/109	District A	Ann.2017 2/14	2318 FEB	
3. Date of Primary / A		-	9	
This report covers from January 1, 20	017 through December 31,2017			
4. Type of Report:			A 10: 30	
180th day prior to primary	40th day after general		2	
90th day prior to primary	Annual (future election)			
30th day prior to primary	Supplemental (past election)			
10th day prior to primary				
10th day prior to general	Amendment to prior report			
5. FINAL REPORT if:				
	ter the election AND all loans and debts paid surplus funds remaining			
Unopposed	T			
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 Kelisha Brad Forel 3026 Independence Ave. Shroneport, LA 71109			
Red River CreditUnion P.O. Box 3261	3026 Independence Ave.			
Shreveport, LA 71133				
9. Name of Person Preparing Report Will	ie Bradford			
Daytime Telephone (318)	218-6184			
10. WE HEREBY CERTIFY that the information con is true and correct to the best of our knowledge, in have been made nor contributions received that information required to be reported by the Louisian deliberately omitted.	formation and belief, and that no expenditures have not been reported herein, and that no	FOR PRINCIPAL CAMPAIC Name and address of princ committee's chairperson, and any (use additional sheets if no	ipał campaign committee, subsidiary committees, if	
This 13 day of February	_, <u>2018</u> .			
Signature of Candidate/Chairperson (To be signed by Chairperson <i>only</i> if report by principal campaign committee)	(318) 318-6184 Daytime Telephone			
Signature of Treasurer Form 102, Rev. 11/14	(3)6)5/8-9986 Daytime Telephone			

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	-0-
2. In-kind Contributions (Schedule A-2)	-0-
3. Campaign paraphernalia sales of \$25 or less	-0-
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 +3)	-0-
5. Other Receipts (Schedule A-3) Interest	6.30
6. Loans Received (Schedule B)	-0-
7. Loan Repayments Received (Schedule D)	-0-
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	6.30

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	200,00
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)	200.00

FINANCIAL SUMMARY	Amount
14. 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 election)	1,396,91
15. Plus total receipts this period (Line 8 above)	6.30
16. Less total disbursements this period (Line 13 above)	200.00
17. Less in-kind contributions (Line 2 above)	-0 -
18. Funds on hand at close of reporting period (Lines 14+15-16-17)	1,203.21

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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. Contributions received by a candidate may be expended for any lawful purpose, but shall not be used for any personal use unrelated to a political campaign or the holding of public office or party position. (R.S. 18:1505.2I.) Each expenditure should include the name of the recipient of the funds, the complete address of the recipient, the date of the expenditure, the amount and a description detailing the purpose of the expenditure. Completion of totals and subtotals may assist in calculating totals that must be reported on the Summary Page.

1. Name and Address of Recipient	Expenditures this Reporting Period a. Date(s) b. Description of Purpose(s) c. A		c. Amount(s)
Cooper Road USA 2920 Round Grove LN. Shrweport, LA 71107	4-21-17	Sponsorsh:p	#200.°°
	•		
3. SUBTOTAL (optional)			<i>t</i> 0 . 0
4. TOTAL (optional - complete only on last page of this schedule)		\$ 200.00	

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