The Senate Victory Fund

Post Office Box 1331, Jackson, Mississippi 39215-1331

Thad Cochran
U.S. Senator
Honorary Chairman

Joseph B. Fenley
Chairman

B. Keith Hill, CPA
Treasurer

To: **Federal Election Commission**

Fax: **202/219-0174**

Date: 3/5/96

Following are schedule(s) regarding our 48 hour notice of contributions received. Should you have any questions, please contact me directly at 601/853-9944.

Thanks.

B. Keith Hill, CPA
Treasurer

Paid for by The Senate Victory Fund

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 48 Hr. Report

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NAME OF COMMITTEE (In Full)

The Senate Victory Fund PAC

FEC# C00202861

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. JOHN ZONNEVELD 1699 E. CERINI AVE. LATON CA 93242 Receipt For: [X] Primary [ ] General [ ] Other (specify):	INFO. REQUESTED INFO. REQUESTED Aggregate Year-to-Date > $	3/5/96	$2,000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) . . . . . >

TOTAL This Period (last page this line number only) . . . . . >

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☑	Other (Specify): FAX	POSTMARKED 3-5-96 and/or DATE OF RECEIPT

PREPARER

3-6-96
DATE PREPARED

FEC FORM 70-2 (12/92)

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