

RECEIVED  
FEC MAIL ROOM

2001 JAN -8 P 12 13

**CHRIS JOHN FOR CONGRESS COMMITTEE, INC.**

January 3, 2001

R. Adam Ragan  
Federal Election Commission  
999 E Street NW  
Washington, D.C. 20463

RE: Chris John for Congress Committee, Inc.  
ID # C00316596  
7/1/00 - 9/30/00 October Quarterly Report  
10/01/00 - 10/18/00 12-Day Pre-General Report

Dear Mr. Ragan:

I am responding to your two (2) correspondences dated December 19, 2000 regarding the above referenced reports. The following is a detail of the resolution of the issues cited in your correspondences.

1. The amounts transferred to the DCCC are transfers of "excess campaign funds". I have enclosed an amendment to the two reports to properly disclose these transfers.
2. Your letter regarding the 12-day Pre-General Report (10/01/00 - 10/18/00) also addressed contributions received from a conduit. We have checked our records and have corrected the reporting of these contributions to reflect the information contained in our records.

The above information together with the enclosed amendments to the October Quarterly Report (7/1/00 - 9/30/00) and the 12-Day Pre-General Report (10/01/00 - 10/18/00) address the review points cited in your correspondences. I am requesting that any disciplinary action in this matter be waived.

Sincerely,



Kenneth R. Dugas, Treasurer  
Chris John for Congress Committee, Inc.

Enclosures



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Kenneth R. Dugas, Treasurer  
Chris John for Congress Committee Inc.  
P.O. Drawer 307  
Crowley, LA 70527

DEC 19 2000

Identification Number: C00316596

Reference: 12 Day Pre-General Report (10/01/00-10/18/00)

Dear Mr. Dugas:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion attached) discloses a contribution(s) which appears to exceed the limits established by the Act. The Act precludes an individual or a political committee from making a contribution to a national party committee in excess of \$20,000 per calendar year. (2 U.S.C. §441a(a)) However, a political committee may make unlimited transfers to a national party committee if the excess amount is determined to be and disclosed as "excess campaign funds". (11 CFR §113.1(e))

If the contribution(s) in question was not completely or correctly reported, you should amend your original report with the correct information. If the contribution made was excessive, you should notify the recipient and request a refund of the amount in excess of \$20,000. You should inform the Commission in writing of such a refund and provide a copy of the refund request sent to the recipient committee. The refund should appear on Line 15 of the Detailed Summary Page and on a supporting Schedule A of the report covering the period in which the refund is received.

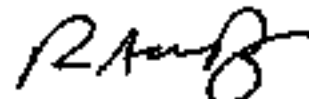
Although the Commission may take further legal action, prompt action by you to obtain a refund of the excessive amount(s) will be considered.

-Schedule A of your report discloses earmarked contributions through a conduit. Please be reminded that when a committee receives an earmarked contribution(s) through an allowable conduit, each individual contribution should be itemized when the individual's total contributions to your committee aggregate over \$200 per calendar year. This itemization must include the full name, address, occupation, and employer of the individual contributor along with the date the contribution was received by the conduit.

In addition, the total contribution(s) received through the conduit should be itemized on Schedule A as a memo entry. The conduit's full name and address (and occupation and employer if the conduit is an individual) must also be provided, along with the date the contribution(s) was transferred to your committee and the total amount of earmarked contributions received from the conduit. Any unitemized contributions received through the conduit should be included in your totals on Line 11(a)(ii) of the Detailed Summary Page. Please refer to the FEC Campaign Guide for Congressional Candidates and Committees for further guidance on how to report earmarked contributions through a conduit. (11 CFR §110.6(c)(2))

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



R. Adam Ragan  
Senior Reports Analyst  
Reports Analysis Division

**SCHEDULE B ITEMIZED DISBURSEMENTS**

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

**Other Disbursements**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **Chris John For Congress Committee INC** C00316596

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement nonfederal Contribution	Date (month, day, year)	Amount of Each Disbursement this Period
Ad And Press Club P.O. Box 1002 Lake Charles LA 70602	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/13/2000	\$100.00
B. Full Name, Mailing Address and ZIP Code Blessed Katherine Drexel 1100 Mill St Lake Charles LA 70601	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/5/2000	\$100.00
C. Full Name, Mailing Address and ZIP Code Danny Thompson Memarkatchum	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/1/2000	\$175.00
D. Full Name, Mailing Address and ZIP Code DCCG 430 South St Washington DC 20003	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/5/2000	\$50,000.00
E. Full Name, Mailing Address and ZIP Code Multiple Sclerosis Society 8550 United Plaza Ste. 1001 Baton Rouge LA 70809	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/13/2000	\$20.00
Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	\$50,395.00
TOTAL This Period (last page this line number only)	\$50,395.00

**SCHEDULE B ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 21

**Other Disbursements**

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NAME OF COMMITTEE (in Full)		C00316596	
A. Full Name, Mailing Address and ZIP Code <b>American Cancer Society</b> 1599 Clifton Road, NE Atlanta GA 30329-4251	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/17/2000	Amount of Each Disbursement this Period \$50.00
B. Full Name, Mailing Address and ZIP Code <b>Boys And Girls Club</b> 301 Veterans Memorial Blvd. Abbeville LA 70510	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/24/2000	Amount of Each Disbursement this Period \$800.00
C. Full Name, Mailing Address and ZIP Code <b>Cerebral Palsy Of La</b> 2380 Barataria Blvd Ste 5 Metairie, LA 70002	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/6/2000	Amount of Each Disbursement this Period \$50.00
D. Full Name, Mailing Address and ZIP Code <b>Christ Of King Church</b> 4843 Hwy 35B Opelousas LA 70570	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/31/2000	Amount of Each Disbursement this Period \$150.00
E. Full Name, Mailing Address and ZIP Code <b>Crowley Fire Dept. MDA</b> 104 W Hutchinson Crowley LA 70526	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/17/2000	Amount of Each Disbursement this Period \$100.00
F. Full Name, Mailing Address and ZIP Code <b>Crowley MS Athletic Dept</b> 263 Hansgens Road Crowley LA 70526	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/17/2000	Amount of Each Disbursement this Period \$100.00
G. Full Name, Mailing Address and ZIP Code <b>Crowley Recreation Dept.</b> 717 W 11th St Crowley LA 70526	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/17/2000	Amount of Each Disbursement this Period \$15.00
H. Full Name, Mailing Address and ZIP Code <b>DCCC</b> 430 South ST Washington DC 20003	Purpose of Disbursement Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 9/8/2000	Amount of Each Disbursement this Period \$25,000.00
I. Full Name, Mailing Address and ZIP Code <b>DCCC</b> 430 South ST Washington DC 20003	Purpose of Disbursement Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 9/8/2000	Amount of Each Disbursement this Period \$2,500.00

SUBTOTAL of Disbursements This Page (optional)

\$27,765.00

TOTAL This Period (last page this line number only)

2001 JAN - 8 P 12:13

1. NAME OF COMMITTEE (in full)  
**Chris John For Congress Committee INC**

ADDRESS (number and street)  Check if different than previously reported.  
**P.O. Drawer 307**

CITY, STATE and ZIP CODE STATE/DISTRICT  
**Crowley, LA 70527 LA 07**

2. FEC IDENTIFICATION NUMBER  
**C00316596**

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

**4. TYPE OF REPORT**

- April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- 12-Day Pre-Election Report for the Primary Election  
(Type of Election)  
election on 11/7/2000 In the State of LA
- 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ In the State of \_\_\_\_\_
- Termination Report

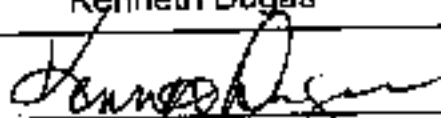
This Report Contains Activity For  Primary Election  General Election  Special Election  Runoff Election

**SUMMARY**

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10/1/2000</u> through <u>10/18/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$54,075.00	\$300,623.20
(b) Total Contribution Refunds (from Line 20(d))	\$500.00	\$2,500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	\$53,575.00	\$298,123.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$115,809.30	\$220,015.26
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$43.48
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$115,809.30	\$219,971.78
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$244,069.79	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Kenneth Dugas**

Signature of Treasurer  Date **1/2/2001**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. Section 9437g.

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# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) Chris John For Congress Committee INC	C00316806	Report Covering the Period: From: 10/1/2000	To: 10/18/2000
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I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) .....	\$8,875.00		11(a)(i)
(ii) Unitemized .....	\$1,500.00		11(a)(ii)
(iii) Total of Contributions from Individuals .....	\$10,375.00	\$109,075.40	11(a)(iii)
(b) Political Party Committees .....	\$0.00	\$0.00	11(b)
(c) Other Political Committees (such as PACs) .....	\$43,700.00	\$191,547.80	11(c)
(d) The Candidate .....	\$0.00	\$0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (ii), (iii), (c), and (d)) .....	\$54,075.00	\$300,623.20	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEE .....	\$0.00	\$0.00	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	13(a)
(b) All Other Loans .....	\$0.00	\$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b)) .....	\$0.00	\$0.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	\$0.00	\$43.48	14
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	\$0.00	\$0.00	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15) .....	\$54,075.00	\$300,666.68	16
<b>II. DISBURSEMENTS</b>			
17. OPERATING EXPENDITURES .....	\$115,809.30	\$220,015.26	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	\$0.00	\$0.00	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	19(a)
(b) Of All Other Loans .....	\$0.00	\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	\$0.00	\$0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees .....	\$0.00	\$1,500.00	20(a)
(b) Political Party Committees .....	\$0.00	\$0.00	20(b)
(c) Other Political Committees (such as PACs) .....	\$500.00	\$1,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c)) .....	\$500.00	\$2,500.00	20(d)
21. OTHER DISBURSEMENTS .....	\$50,395.00	\$99,962.46	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21) .....	\$166,704.30	\$322,477.72	22

### III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	\$356,699.09	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....	\$54,075.00	24
25. SUBTOTAL (add Line 23 and Line 24) .....	\$410,774.09	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....	\$166,704.30	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) .....	\$244,069.79	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 7

FOR LINE NUMBER

11(c)

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Campaign, Gil Pinac P.O. Box 495 Crowley LA 70527</b>		10/18/2000	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$100.00	
<b>B. Full Name, Mailing Address and ZIP Code Committee, DCCC 430 South St. Washington DC 20003</b>		10/18/2000	\$1,000.00 MEMO ACTED AS CONDUIT
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$0.00	
<b>C. Full Name, Mailing Address and ZIP Code Pac, Alltel Corporation One Allied Dr. Little Rock AR 72202</b>		10/16/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	
<b>D. Full Name, Mailing Address and ZIP Code Pac, American Medical Association 1101 Vermont Ave NW Washington DC 20005</b>		10/16/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	
<b>E. Full Name, Mailing Address and ZIP Code Pac, American Sugar Cane League P.O. Box 938 Thibodaux LA 70302</b>		10/16/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	
<b>F. Full Name, Mailing Address and ZIP Code Pac, Arab American Leadership 918 18th Street NW Suite 601 Washington DC 20006</b>		10/16/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	
<b>G. Full Name, Mailing Address and ZIP Code Pac, Arent Fox Civic Participation Fund 1050 Connecticut Ave. NW Washington DC 20036</b>		10/16/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$5,100.00

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate statements for each category of the Detailed Summary Page

PAGE 4 OF 7

FOR LINE NUMBER

11(c)

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full) **Chris John For Congress Committee INC** **C00318596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Pac, ENPAC</b> P.O. Box 2431 Baton Rouge LA 70821		10/16/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$2,500.00			
<b>B. Full Name, Mailing Address and ZIP Code</b> Pac, Equi 1290 Avenue of the Americas 17 F New York NY 10104		10/16/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$1,000.00			
<b>C. Full Name, Mailing Address and ZIP Code</b> Pac, FPL 700 Universe Blvd. North Palm Beach FL 33408		10/18/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$500.00			
<b>D. Full Name, Mailing Address and ZIP Code</b> Pac, Fresh 727 N Washington St. Alexandria VA 22314		10/16/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$500.00			
<b>E. Full Name, Mailing Address and ZIP Code</b> Pac, General Electric Company 1299 Pennsylvania Ave NW Suite 1100 Washington DC 20006		10/16/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$1,500.00			
<b>F. Full Name, Mailing Address and ZIP Code</b> Pac, International Association of Fire Fighters 1750 New York Ave NW Washington DC 20006		10/18/2000	\$1,000.00 From Conduit
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$1,000.00			
<b>G. Full Name, Mailing Address and ZIP Code</b> Pac, Ipa Wildcatters Fund 1101 16th Street NW Washington DC 20036		10/16/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
Aggregate Year-to-Date > \$500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>\$5,000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 21

**Other Disbursements**

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NAME OF COMMITTEE (In Full)		C00316596	
<b>A. Full Name, Mailing Address and ZIP Code</b> American Cancer Society Street Required Crowley LA 70527	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/17/2000	Amount of Each Disbursement this Period \$50.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Boys And Girls Club 301 Veterans Memorial Blvd. Abbeville LA 70510	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/24/2000	Amount of Each Disbursement this Period \$800.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Cerebral Palsy Of La 2380 Barataria Blvd Ste 5 Metairie LA 70002	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/6/2000	Amount of Each Disbursement this Period \$50.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Christ Of King Church 4849 Hwy 35B Opelousas LA 70570	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/31/2000	Amount of Each Disbursement this Period \$150.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Crowley Fire Dept. MDA 104 W Hutchinson Crowley LA 70526	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 8/17/2000	Amount of Each Disbursement this Period \$100.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Crowley HS Athletic Dept 263 Hensgens Road Crowley LA 70526	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/17/2000	Amount of Each Disbursement this Period \$100.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Crowley Recreation Dept. 717 W Mill St. Crowley LA 70526	Purpose of Disbursement nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 7/17/2000	Amount of Each Disbursement this Period \$15.00
<b>H. Full Name, Mailing Address and ZIP Code</b> DCCC 430 South ST Washington DC 20003	Purpose of Disbursement excess campaign funds Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 9/8/2000	Amount of Each Disbursement this Period \$25,000.00
<b>I. Full Name, Mailing Address and ZIP Code</b> DCCC 430 South ST Washington DC 20003	Purpose of Disbursement excess campaign funds Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 9/8/2000	Amount of Each Disbursement this Period \$1,500.00

SUBTOTAL of Disbursements This Page (optional)	\$27,765.00
TOTAL This Period (last page this line number only)	

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 1-8-01
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMP</i> PREPARER	1-8-01 DATE PREPARED