

FEC
FORM 3REPORT OF RECEIPTS
AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

2/5/04

DATE

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINTExample: If typing, type
over the lines

John Breau Committee

ADDRESS (number and street)

Post Office Box 4042

Check if different
than previously
reported. (ACC)

Baton Rouge

LA

70821

4042

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

CD0215830

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

LA

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

In the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

In the
State of

5. Covering Period

10

01

2003

through

12

31

2003

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

Signature of Treasurer

Date

1

29

2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

Office
Use
OnlyFEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

John Broxton Committee

Report Covering the Period:

From:

MM
10DD
01YYYY
2003

To:

MM
12DD
31YYYY
2003

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	22900.00	1,100,581.76
(b) Total Contribution Refunds (from Line 20(d)).....	119031.07	119031.07
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-96131.07	981,550.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	73340.21	1,200,704.32
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	19,948.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	73340.21	1,180,756.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1314436.52	
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	

For further information contact:

Federal Election Commission
899 E Street, NW
Washington, DC 20463Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
John Breau Committee

Report Covering the Period:

From:

10

01

2003

To:

12

31

2003

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)

3500.00

(ii) Unitemized

400.00

(iii) TOTAL of contributions

3900.00

from individuals

393,417.92

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees (such as PACS)

19000.00

707,183.84

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

22900.00

1,100,581.76

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate

0.00

0.00

(b) All Other Loans

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b))

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

19,948.20

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

2612.21

242,630.51

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)

26612.21

1,365,160.47

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	73340.21	1,200,704.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	47348.44	47348.44
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	71682.63	71682.63
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	119031.07	119031.07
21. OTHER DISBURSEMENTS.....	111500.00	308,144.57
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [..]	303871.28	1,628,878.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1592795.59
24. TOTAL RECEIPTS THIS PERIOD (from Line 18, page3).....	26512.21
25. SUBTOTAL (add Line 23 and Line 24).....	1618307.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	303871.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1314436.52

FEC FORM 32-1 (File with Form 3)

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number
Name of Principal Campaign Committee John Breaux Committee		Committee ID Number C 000215830
Committee Address Post Office Box 4042		
City Baton Rouge	State LA	ZIP 70821-4042
Report Covering Period (check one) ☐ through June 30, or ☒ through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	1,246,129 .00	119,031 .00
2. Aggregate amount of contributions from personal funds of the candidate	.00	.00
3. Gross receipts minus the candidate's personal contributions	1,246,129 .00	119,031 .00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 91

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☐ 13a	☐ 13b	☐ 14	

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)

John Breaux Committee

A. Full Name (Last, First, Middle Initial)
Alec Berkman

Mailing Address 1056 Easthills Drive

City West Covina State CA Zip Code 91791

FEC ID number of contributing federal political committee. C

Name of Employer Executive Compensation Solutions

Occupation Financial Consultant

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11A1.9039

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(j)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Dardis

Mailing Address 5321 S. Robertson Street

City New Orleans State LA Zip Code 70118

FEC ID number of contributing federal political committee. C

Name of Employer Jack Dardis & Associates

Occupation President

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt

MM / DD / YYYY
12 / 08 / 2003

Transaction ID: SA11A1.9041

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(j)/441a-1)

C. Full Name (Last, First, Middle Initial)
H. Lary Fortenberry, CLU

Mailing Address Post Office Box 16566

City Jackson State MS Zip Code 39236

FEC ID number of contributing federal political committee. C

Name of Employer Executive Planning Group

Occupation Life Underwriter

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11A1.9074

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(j)/441a-1)

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7/81

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. William Horton

Mailing Address 1120 Chester Avenue
Suite 400

City	State	Zip Code
Cleveland	OH	44114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Todd OrganizationOccupation
Principal

Receipt For: 2004

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
12 / 08 / 2003

Transaction ID: SA11A1.9042

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

Full Name (Last, First, Middle Initial)

B. H. Kirk Lewis

Mailing Address 3150 Lenox Park Blvd.
Suite 320

City	State	Zip Code
Memphis	TN	38115-4296

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lewis & Knowlton Financial
Group, Inc.Occupation
Partner/Financial Services

Receipt For: 2004

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
12 / 08 / 2003

Transaction ID: SA11A1.9049

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

Full Name (Last, First, Middle Initial)

C. Michael Radon

Mailing Address 5321 Longmont

City	State	Zip Code
Houston	TX	77068

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Longmont Group, Inc.Occupation
Life Underwriter

Receipt For: 2004

☒ Primary ☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
12 / 08 / 2003

Transaction ID: SA11A1.9045

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☐ 13a	☐ 13b	☐ 14	

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Steven Ricchetti

Mailing Address 2500 24th Street N

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ricchetti, Inc.Occupation
Partner

Receipt For: 2004

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11A1.9072

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

Full Name (Last, First, Middle Initial)

B. Cynthia D. Schumacker

Mailing Address 911 Bates Road

City

Rocky River

State

OH

Zip Code

44116

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Life Insurance Market-
ing CompanyOccupation
Insurance

Receipt For: 2004

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11A1.9078

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

Full Name (Last, First, Middle Initial)

C. Howard Silverman

Mailing Address 3 Bala Plaza East
5th Floor

City

Bala Cynwyd

State

PA

Zip Code

19004

FEC ID number of contributing
federal political committee.

C

Name of Employer
HSA CorporationOccupation
Insurance & Financial Services

Receipt For: 2004

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11A1.9040

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)41a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1600.00

TOTAL This Period (last page this line number only) ▶

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 91

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (in Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. **ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA) APA PAC**

Mailing Address 14600 TRINITY BLVD SUITE 500

City

FT WORTH

State

TX

Zip Code

76155

FEC ID number of contributing
federal political committee.

C

C00267849

Name of Employer

Occupation

Receipt For: 2004

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
12 / 08 / 2003

Transaction ID: SA11C.9051

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

Full Name (Last, First, Middle Initial)

B. **AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 1130 Connecticut Avenue NW
Suite 1000

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

C00103143

Name of Employer

Occupation

Receipt For: 2004

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11C.9055

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

Full Name (Last, First, Middle Initial)

C. **AMGEN INC POLITICAL ACTION COMMITTEE**

Mailing Address 1300 EYE STREET NW SUITE 470 EAST

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00251876

Name of Employer

Occupation

Receipt For: 2004

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11C.9052

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 10 / 91	
(check only one)			
☐ 11a	☐ 11b	☒ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
			☐ 15

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NAME OF COMMITTEE (in full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. AMGEN INC POLITICAL ACTION COMMITTEE

Mailing Address 1300 EYE STREET NW SUITE 470 EAST

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

C00251876

Name of Employer

Occupation

Receipt For: 2004

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11C.9053

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. BRISTOL-MYERS SQUIBB COMPANY EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 345 Park Avenue

City

New York

State

NY

Zip Code

10154

FEC ID number of contributing
federal political committee.

C

C00035875

Name of Employer

Occupation

Receipt For: 2004

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11C.9060

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. CHUBB CORPORATION POLITICAL ACTION COMMITTEE-CHUBBPAC, THE

Mailing Address 15 Mountain View Road
PO BOX 1651

City

Warren

State

NJ

Zip Code

07059

FEC ID number of contributing
federal political committee.

C

C00229203

Name of Employer

Occupation

Receipt For: 2004

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11C.9084

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 91

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. ESOP ASSOCIATION PAC

Mailing Address 1726 M STREET, NW SUITE 501

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00196089

Name of Employer

Occupation

Receipt For: 2004

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11C.9088

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

Full Name (Last, First, Middle Initial)

B. INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street SE Suite 300

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2004

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY
12 / 15 / 2003

Transaction ID: SA11C.9054

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

Full Name (Last, First, Middle Initial)

C. MATSON NAVIGATION CO. FEDERAL ELECTION COMMITTEE

Mailing Address 555 12th Street
8th Floor

City	State	Zip Code
Oakland	CA	94607

FEC ID number of contributing federal political committee.

C C00024752

Name of Employer

Occupation

Receipt For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
11 / 18 / 2003

Transaction ID: SA11C.9066

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(j)(4)(A)-1)

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 91

(check only one)

☐ 11a	☐ 11b	☒ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
☐ 15			

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1724 MASSACHUSETTS AVENUE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00010082

Name of Employer

Occupation

Receipt For: 2004

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

(NGLD Date) Receipt

MM	DD	YYYY
11	18	2003

Transaction ID: SA11C.9069

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

Full Name (Last, First, Middle Initial)

B. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEEMailing Address 51 Madison Ave.
Room 1900

City	State	Zip Code
New York	NY	10010

FEC ID number of contributing federal political committee.

C C00158881

Name of Employer

Occupation

Receipt For: 2004

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM	DD	YYYY
11	18	2003

Transaction ID: SA11C.9062

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

Full Name (Last, First, Middle Initial)

C. ZENECA INC. POLITICAL ACTION COMMITTEEMailing Address c/o Zeneca Inc.
1800 Concord Pike PO Box 15437

City	State	Zip Code
Wilmington	DE	19850

FEC ID number of contributing federal political committee.

C C00279455

Name of Employer

Occupation

Receipt For: 2004

☒ Primary
 ☐ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM	DD	YYYY
12	15	2003

Transaction ID: SA11C.9058

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(441a-1))

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

18000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 / 91

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

John Breaux Committee

A. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette
Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

71534.33

Date of Receipt

10 / 01 / 2003

Transaction ID: SA15.9370

Amount of Each Receipt this Period

863.38

Dividend Income

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

B. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette
Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

72416.02

Date of Receipt

11 / 01 / 2003

Transaction ID: SA15.9371

Amount of Each Receipt this Period

861.68

Dividend Income

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

C. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette
Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

73283.16

Date of Receipt

12 / 01 / 2003

Transaction ID: SA15.9372

Amount of Each Receipt this Period

867.14

Dividend Income

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional)

2612.21

TOTAL This Period (last page this line number only)

2612.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Assets Consulting

Mailing Address 100-B East Broad Street

City	State	Zip Code
Falls Church	VA	22048

Purpose of Disbursement
Contractual Services

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9191

Date of Disbursement

MM	DD	YY
10	01	2003

Amount of Each Disbursement this Period

8000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Assets Consulting

Mailing Address 100-B East Broad Street

City	State	Zip Code
Falls Church	VA	22048

Purpose of Disbursement
See Memo

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9272

Date of Disbursement

MM	DD	YY
10	01	2003

Amount of Each Disbursement this Period

2459.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Levy Restaurant

Mailing Address Post Office Box 630442

City	State	Zip Code
Baltimore	MD	21263

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9272.0

Date of Disbursement

MM	DD	YY
10	01	2003

Amount of Each Disbursement this Period

1584.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

10469.37

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. The Monocle

Mailing Address 107 D Street NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Event Expenses

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9272.1

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	3

Amount of Each Disbursement this Period

385.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address Post Office Box 1140

City
MemphisState
TNZip Code
38101-1140Purpose of Disbursement
Courier

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9272.2

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	3

Amount of Each Disbursement this Period

66.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

Full Name (Last, First, Middle Initial)

C. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22048Purpose of Disbursement
Parking/Telephone/Courier

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9272.3

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	3

Amount of Each Disbursement this Period

423.16

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22046Purpose of Disbursement
See Memo

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

2764.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. La Colline

Mailing Address 400 N. Capitol NW

City
WashingtonState
DCZip Code
20007Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.0

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

948.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. The Monocle

Mailing Address 107 D Street NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.1

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

1445.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2764.51

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Bresux Committee

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address Post Office Box 1140

City
MemphisState
TNZip Code
38101-1140

Purpose of Disbursement

Courier

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.2

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

33.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bistro BIS

Mailing Address 15 E Street NW

City
WashingtonState
DCZip Code
20001

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.3

Date of Disbursement

10	01	2003
----	----	------

Amount of Each Disbursement this Period

96.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hyatt Regency Chesapeake Bay

Mailing Address 100 Heron Blvd.

City
CambridgeState
MDZip Code
21613

Purpose of Disbursement

Travel: Lodging

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.4

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

207.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22048Purpose of Disbursement
Telephone/Parking

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9271.5

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	0	2	4	2	0	0	3

Amount of Each Disbursement this Period

33.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22048Purpose of Disbursement
Contractual Services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9192

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	1	2	0	0	3

Amount of Each Disbursement this Period

8000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22048Purpose of Disbursement
Contractual Services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9194

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	3

Amount of Each Disbursement this Period

8000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

16000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Assets Consulting

Mailing Address 100-B East Broad Street

City	State	Zip Code
Falls Church	VA	22048

Purpose of Disbursement
See Memo

Candidate Name

Category/
Type

Office Sought:	House ☐ Senate ☐ President	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼
State:	District:	

Transaction ID: SB17.9289

Date of Disbursement

M	D	Y
12	26	2003

Amount of Each Disbursement this Period

1411.49

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. The Monocle

Mailing Address 107 D Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:	House ☐ Senate ☐ President	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼
State:	District:	

Transaction ID: SB17.9289.0

Date of Disbursement

M	D	Y
12	15	2003

Amount of Each Disbursement this Period

501.14

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Charlie Palmer Steak

Mailing Address 101 Constitution Avenue NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:	House ☐ Senate ☐ President	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼
State:	District:	

Transaction ID: SB17.9289.1

Date of Disbursement

M	D	Y
12	17	2003

Amount of Each Disbursement this Period

427.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1411.49

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address Post Office Box 1140

City
MemphisState
TNZip Code
38101-1140Purpose of Disbursement
Courier

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9269.2

Date of Disbursement

12	18	2003
----	----	------

Amount of Each Disbursement this Period

99.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9269.3

Date of Disbursement

12	18	2003
----	----	------

Amount of Each Disbursement this Period

41.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Assets Consulting

Mailing Address 100-B East Broad Street

City
Falls ChurchState
VAZip Code
22048Purpose of Disbursement
Telephone/Taxi

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9269.4

Date of Disbursement

12	18	2003
----	----	------

Amount of Each Disbursement this Period

341.14

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Transaction ID: SB17.9207

Date of Disbursement

10	06	2003
----	----	------

Mailing Address Post Office Box 8220

City	State	Zip Code
Aurora	IL	60572-8220

Amount of Each Disbursement this Period

182.33

Purpose of Disbursement

Telephone

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. AT&T Wireless

Transaction ID: SB17.9211

Date of Disbursement

11	03	2003
----	----	------

Mailing Address Post Office Box 8220

City	State	Zip Code
Aurora	IL	60572-8220

Amount of Each Disbursement this Period

87.00

Purpose of Disbursement

Telephone

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. AT&T Wireless

Transaction ID: SB17.9218

Date of Disbursement

12	08	2003
----	----	------

Mailing Address Post Office Box 8220

City	State	Zip Code
Aurora	IL	60572-8220

Amount of Each Disbursement this Period

1014.31

Purpose of Disbursement

Telephone

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1263.64

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Mailing Address Post Office Box 8220

City
AuroraState
ILZip Code
60572-8220

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9210

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	2	6	2	0	0	3

Amount of Each Disbursement this Period

343.58

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of America Visa

Mailing Address Post Office Box 53139

City
PhoenixState
AZZip Code
85072-3139

Purpose of Disbursement

See Memo

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9368

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	1	5	2	0	0	3

Amount of Each Disbursement this Period

2778.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821

Purpose of Disbursement

Postage-Christmas Cards

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9368.0

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	1	5	2	0	0	3

Amount of Each Disbursement this Period

2778.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

3118.58

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

John Breau Committee

A. Full Name (Last, First, Middle Initial) Bell South		Transaction ID: SB17.9224 Date of Disbursement MM / DD / YYYY 10 / 15 / 2003	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 29.33	
City Atlanta	State GA	Zip Code 30385-0001	☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fax		Category/ Type	
Candidate Name			
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Bell South		Transaction ID: SB17.9223 Date of Disbursement MM / DD / YYYY 11 / 14 / 2003	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 29.33	
City Atlanta	State GA	Zip Code 30385-0001	☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fax		Category/ Type	
Candidate Name			
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Bell South		Transaction ID: SB17.9222 Date of Disbursement MM / DD / YYYY 12 / 15 / 2003	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 28.70	
City Atlanta	State GA	Zip Code 30385-0001	☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Fax		Category/ Type	
Candidate Name			
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: 2004 ☒ Primary ☐ General ☐ Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		87.36	
TOTAL This Period (last page this line number only)			

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Bell South CorporationMailing Address 1133 21st Street
Suite 900City
WashingtonState
DCZip Code
20036

Purpose of Disbursement

Travel: Air Fare

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9202

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	6	2	0	0	3

Amount of Each Disbursement this Period

4095.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Capital One

Mailing Address Post Office Box 8000

City
SeattleState
WAZip Code
98190-8000

Purpose of Disbursement

See Memo

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9369

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	6	2	0	0	3

Amount of Each Disbursement this Period

337.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821

Purpose of Disbursement

Postage-Mardi Gras

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9389.0

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	6	2	0	0	3

Amount of Each Disbursement this Period

337.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional) ▶

4433.40

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Chrysler Financial

Mailing Address Post Office Box 3208

City	State	Zip Code
Milwaukee	WI	53201

Purpose of Disbursement

Lease

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9245

Date of Disbursement

10	06	2003
----	----	------

Amount of Each Disbursement this Period

587.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Chrysler Financial

Mailing Address Post Office Box 3208

City	State	Zip Code
Milwaukee	WI	53201

Purpose of Disbursement

Lease

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9250

Date of Disbursement

11	03	2003
----	----	------

Amount of Each Disbursement this Period

587.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Chrysler Financial

Mailing Address Post Office Box 3208

City	State	Zip Code
Milwaukee	WI	53201

Purpose of Disbursement

Lease

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9251

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

587.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1762.77

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Cingular Wireless

Mailing Address Post Office Box 530016

City	State	Zip Code
Atlanta	GA	30353-0016

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9205

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	0	0	6	2	0	0	3

Amount of Each Disbursement this Period

222.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address Post Office Box 530016

City	State	Zip Code
Atlanta	GA	30353-0016

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9220

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	3	2	0	0	3

Amount of Each Disbursement this Period

222.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address Post Office Box 530016

City	State	Zip Code
Atlanta	GA	30353-0016

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9219

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	0	8	2	0	0	3

Amount of Each Disbursement this Period

596.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1041.69

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)
A. Climastor

Mailing Address Post Office Box 84058

City State Zip Code
Baton Rouge LA 70884-4058

Purpose of Disbursement
Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9243
Date of Disbursement

10	01	2003
----	----	------

Amount of Each Disbursement this Period

43.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Climastor

Mailing Address Post Office Box 84058

City State Zip Code
Baton Rouge LA 70884-4058

Purpose of Disbursement
Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9252
Date of Disbursement

11	01	2003
----	----	------

Amount of Each Disbursement this Period

43.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Climastor

Mailing Address Post Office Box 84058

City State Zip Code
Baton Rouge LA 70884-4058

Purpose of Disbursement
Lease

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9253
Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

43.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

129.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Community Coffee

Mailing Address Post Office Box 60141

City
New OrleansState
LAZip Code
70160-0141Purpose of Disbursement
Constituent: Refreshments

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9182

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

176.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Crowley Post-Signal

Mailing Address Post Office Box 1589

City
CrowleyState
LAZip Code
70527-1589Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9198

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

165.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. Epiphany Productions

Mailing Address 104 E. Hume Avenue

City
AlexandriaState
VAZip Code
22301Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9260

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

81.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

433.73

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Executive Sedan Service

Mailing Address 810 Spring Knoll Drive

City Herndon	State VA	Zip Code 20170
-----------------	-------------	-------------------

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9204
Date of Disbursement

MM	DD	YY
11	14	2003

Amount of Each Disbursement this Period

1046.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address Post Office Box 1140

City Memphis	State TN	Zip Code 38101-1140
-----------------	-------------	------------------------

Purpose of Disbursement
Courier Service

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9185
Date of Disbursement

MM	DD	YY
10	24	2003

Amount of Each Disbursement this Period

60.93

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address Post Office Box 1140

City Memphis	State TN	Zip Code 38101-1140
-----------------	-------------	------------------------

Purpose of Disbursement
Courier Service

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9183
Date of Disbursement

MM	DD	YY
11	03	2003

Amount of Each Disbursement this Period

10.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional) ▶

1117.37

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Federal Express

Transaction ID: SB17.9186

Date of Disbursement

12	01	2003
----	----	------

Mailing Address Post Office Box 1140

City Memphis	State TN	Zip Code 38101-1140
-----------------	-------------	------------------------

Purpose of Disbursement

Courier Service

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

140.22

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Full Name (Last, First, Middle Initial)

B. Federal Express

Transaction ID: SB17.9187

Date of Disbursement

12	08	2003
----	----	------

Mailing Address Post Office Box 1140

City Memphis	State TN	Zip Code 38101-1140
-----------------	-------------	------------------------

Purpose of Disbursement

Courier Service

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Full Name (Last, First, Middle Initial)

C. Federal Express

Transaction ID: SB17.8180

Date of Disbursement

12	15	2003
----	----	------

Mailing Address Post Office Box 1140

City Memphis	State TN	Zip Code 38101-1140
-----------------	-------------	------------------------

Purpose of Disbursement

Courier Service

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

19.31

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

165.10

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. First USA Bank NA

Mailing Address Post Office Box 94014

City
PalatineState
ILZip Code
60094-4014

Purpose of Disbursement

See Memo

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291

Date of Disbursement

10	08	2003
----	----	------

Amount of Each Disbursement this Period

891.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Ben & Jerry's Ice Cream

Mailing Address 50 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002-4214

Purpose of Disbursement

Constituent Refreshments

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291.0

Date of Disbursement

10	02	2003
----	----	------

Amount of Each Disbursement this Period

40.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Sequoia

Mailing Address 1776 K Street NW

City
WashingtonState
DCZip Code
20006-2304

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291.1

Date of Disbursement

10	03	2003
----	----	------

Amount of Each Disbursement this Period

129.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

891.30

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Lounge 201

Mailing Address 201 Massachusetts Avenue

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9291.2

Date of Disbursement

10	06	2003
----	----	------

Amount of Each Disbursement this Period

17.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Tortilla Coast

Mailing Address 400 1st Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9291.3

Date of Disbursement

10	08	2003
----	----	------

Amount of Each Disbursement this Period

30.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address Union Station

City
WashingtonState
DC

Zip Code

Purpose of Disbursement
Travel/Train

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9291.4

Date of Disbursement

10	28	2003
----	----	------

Amount of Each Disbursement this Period

128.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Exxon Mobil Corp.

Mailing Address Post Office Box 4555

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement
Travel: Gasoline

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9291.5
Date of Disbursement

MM	DD	YY
10	22	2003

Amount of Each Disbursement this Period

27.58

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. La Loma Mexican Restaurant

Mailing Address 318 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9291.6
Date of Disbursement

MM	DD	YY
12	24	2003

Amount of Each Disbursement this Period

52.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. U.S. Senate Gift Shop

Mailing Address First & C Streets, N.E.

City	State	Zip Code
Washington	DC	20510

Purpose of Disbursement
Constituent: Gifts

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9291.7
Date of Disbursement

MM	DD	YY
10	24	2003

Amount of Each Disbursement this Period

58.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Gordon Blasch Restaurant

Mailing Address 900 F Street NW

City
WashingtonState
DC

Zip Code

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291.8

Date of Disbursement

10	20	2003
----	----	------

Amount of Each Disbursement this Period

122.30

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. America Restaurant

Mailing Address 50 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291.9

Date of Disbursement

12	18	2003
----	----	------

Amount of Each Disbursement this Period

101.78

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jo Anne's Floral Designs

Mailing Address 96 Westchester Drive

City
LafayetteState
LAZip Code
70508Purpose of Disbursement
Constituent: Flowers

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9291.10

Date of Disbursement

12	10	2003
----	----	------

Amount of Each Disbursement this Period

123.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Center Cafe

Mailing Address 80 M Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Meal

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9291.11

Date of Disbursement

MM	DD	YYYY
10	15	2003

Amount of Each Disbursement this Period

61.15

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. First USA Bank NA

Mailing Address Post Office Box 94014

City	State	Zip Code
Palatine	IL	60094-4014

Purpose of Disbursement
See Memo

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292

Date of Disbursement

MM	DD	YYYY
11	03	2003

Amount of Each Disbursement this Period

4784.28

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. The Monocle

Mailing Address 107 D Street NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.0

Date of Disbursement

MM	DD	YYYY
11	15	2003

Amount of Each Disbursement this Period

1101.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

4784.28

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (in full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. La Loma Mexican Restaurant

Mailing Address 316 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

 Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.8282.1

Date of Disbursement

11	17	2003
----	----	------

Amount of Each Disbursement this Period

342.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. La Brasserie

Mailing Address 238 Massachusetts Avenue NE

City
WashingtonState
DCZip Code
20002

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

 Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.8282.2

Date of Disbursement

11	15	2003
----	----	------

Amount of Each Disbursement this Period

229.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Exxon Mobil Corp.

Mailing Address Post Office Box 4555

City
Carol StreamState
ILZip Code
60197

Purpose of Disbursement

Travel/Gasoline

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

 Disbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.8282.3

Date of Disbursement

11	15	2003
----	----	------

Amount of Each Disbursement this Period

63.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (in Full)
John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Marriott Airport Hotel

Mailing Address George W. Bush International Apt

City Houston State TX Zip Code

Purpose of Disbursement
Travel/Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.4

Date of Disbursement

10 / 11 / 2003

Amount of Each Disbursement this Period

471.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hertz-Rent-A-Car

Mailing Address Airport

City Richmond State VA Zip Code

Purpose of Disbursement
Travel/Auto Rental

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.5

Date of Disbursement

10 / 13 / 2003

Amount of Each Disbursement this Period

420.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Chevron Oil Co.

Mailing Address 2929 College Drive

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Travel/Gasoline

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.6

Date of Disbursement

10 / 13 / 2003

Amount of Each Disbursement this Period

13.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. U.S. Senate Gift Shop

Mailing Address First & C Streets, N.E.

City	State	Zip Code
Washington	DC	20510

Purpose of Disbursement

Constituent Gift

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.7

Date of Disbursement

MM	DD	YY
11	01	2003

Amount of Each Disbursement this Period

10.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Yamto Teriyaki

Mailing Address 201 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.8

Date of Disbursement

MM	DD	YY
10	22	2003

Amount of Each Disbursement this Period

48.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address Post Office Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement

Equipment

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.9

Date of Disbursement

MM	DD	YY
11	01	2003

Amount of Each Disbursement this Period

112.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Community Coffee

Mailing Address Post Office Box 80141

City	State	Zip Code
New Orleans	LA	70160-0141

Purpose of Disbursement
Constituent Refreshments

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.10

Date of Disbursement

M	D	Y
11	05	2003

Amount of Each Disbursement this Period

55.54

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**(MEMO ITEM)**

Full Name (Last, First, Middle Initial)

B. Ralph & Kacoo's Restaurant

Mailing Address 6110 Bluebonnet Blvd.

City	State	Zip Code
Baton Rouge	LA	70809

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.11

Date of Disbursement

M	D	Y
11	13	2003

Amount of Each Disbursement this Period

60.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**(MEMO ITEM)**

Full Name (Last, First, Middle Initial)

C. H. H. Leonard's Associates

Mailing Address 2020 O Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9292.12

Date of Disbursement

M	D	Y
11	17	2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**(MEMO ITEM)**

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. A. V. Ristorante Italiano

Mailing Address 807 New York Avenue NW

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement

Event Expenses

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.13

Date of Disbursement

MM	DD	YY
11	14	2003

Amount of Each Disbursement this Period

538.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Texaco, Inc

Mailing Address Post Office Box 9151

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement

Travel: Gasoline

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.14

Date of Disbursement

MM	DD	YY
11	16	2003

Amount of Each Disbursement this Period

32.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Superior Grill

Mailing Address 5435 Government Street

City	State	Zip Code
Baton Rouge	LA	70806

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.15

Date of Disbursement

MM	DD	YY
11	16	2003

Amount of Each Disbursement this Period

20.99

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address Post Office Box 9151

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement

Travel: Gasoline

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.16

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	3

Amount of Each Disbursement this Period

61.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Marriott Hotel

Mailing Address 5500 Hilton Avenue

City	State	Zip Code
Baton Rouge	LA	70808

Purpose of Disbursement

Travel: Lodging

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9292.17

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	1	3	2	0	0	3

Amount of Each Disbursement this Period

166.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. First USA Bank NA

Mailing Address Post Office Box 94014

City	State	Zip Code
Palatine	IL	60064-4014

Purpose of Disbursement

See Memo

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	0	8	2	0	0	3

Amount of Each Disbursement this Period

4499.23

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4499.23

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (in full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address Post Office Box 307

City
PittsburghState
PAZip Code
15230-9786Purpose of Disbursement
Travel: Air Fare

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9293.0

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

2047.98

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. U.S. Senate Gift Shop

Mailing Address First & C Streets, N.E.

City
WashingtonState
DCZip Code
20510Purpose of Disbursement
Constituent: Gifts

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9293.1

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

168.50

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Jo Anne's Floral Designs

Mailing Address 86 Westchester Drive

City
LafayetteState
LAZip Code
70508Purpose of Disbursement
Constituent: Flowers

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9293.2

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

101.40

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. La Brasserie

Mailing Address 239 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9293.3

Date of Disbursement

M	D	Y
12	08	2003

Amount of Each Disbursement this Period

156.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Crowley Flower Shop

Mailing Address

City	State	Zip Code
Crowley	LA	

Purpose of Disbursement
Constituent: Flowers

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9293.4

Date of Disbursement

M	D	Y
12	08	2003

Amount of Each Disbursement this Period

46.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. America Restaurant

Mailing Address 50 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9293.5

Date of Disbursement

M	D	Y
12	08	2003

Amount of Each Disbursement this Period

47.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Braaux Committee

Full Name (Last, First, Middle Initial)

A. La Loma Mexican Restaurant

Mailing Address 316 Massachusetts Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.8

Date of Disbursement

12	17	2003
----	----	------

Amount of Each Disbursement this Period

209.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Smith's

Mailing Address Union Station

City	State	Zip Code
Washington	DC	

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.7

Date of Disbursement

12	16	2003
----	----	------

Amount of Each Disbursement this Period

209.93

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Fox & Hound

Mailing Address 5248 Corporate Blvd.

City	State	Zip Code
Baton Rouge	LA	70808

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.8

Date of Disbursement

12	22	2003
----	----	------

Amount of Each Disbursement this Period

19.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Windsor Court

Mailing Address 300 Gravier Street

City	State	Zip Code
New Orleans	LA	70130

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.9

Date of Disbursement

MM	DD	YY
12	01	2003

Amount of Each Disbursement this Period

48.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. El Camino's

Mailing Address 1901 Veterans Memorial Hwy

City	State	Zip Code
Abbeville	LA	70510

Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.10

Date of Disbursement

MM	DD	YY
11	04	2003

Amount of Each Disbursement this Period

71.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Wynne Flower Shop

Mailing Address 1210 Falls Blvd. North

City	State	Zip Code
Wynne	AR	72396

Purpose of Disbursement
Constituent Flowers

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.11

Date of Disbursement

MM	DD	YY
12	08	2003

Amount of Each Disbursement this Period

53.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Braux Committee

Full Name (Last, First, Middle Initial)

A. Company Flowers

Mailing Address 2107 Pollard Street N

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement

Constituent: Flowers

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.12

Date of Disbursement

MM	DD	YY
12	12	2003

Amount of Each Disbursement this Period

57.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

Full Name (Last, First, Middle Initial)

B. Exxon Mobil Corp.

Mailing Address Post Office Box 4555

City	State	Zip Code
Carol Stream	IL	60197

Purpose of Disbursement

Travel: Gasoline

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.13

Date of Disbursement

MM	DD	YY
12	24	2003

Amount of Each Disbursement this Period

84.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

Full Name (Last, First, Middle Initial)

C. A Royal Coach

Mailing Address 5505 Fann Road 1980 W

City	State	Zip Code
Houston	TX	77069

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President
State:	District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.14

Date of Disbursement

MM	DD	YY
10	27	2003

Amount of Each Disbursement this Period

287.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address Post Office Box 9151

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement

Travel: Gasoline

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.15

Date of Disbursement

MM	DD	YY
12	29	2003

Amount of Each Disbursement this Period

35.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Christina's Restaurant

Mailing Address 320 St. Charles Street

City	State	Zip Code
Baton Rouge	LA	70802

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.16

Date of Disbursement

MM	DD	YY
12	05	2003

Amount of Each Disbursement this Period

34.07

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Don's Seafood

Mailing Address 4309 Johnston Street

City	State	Zip Code
Lafayette	LA	70503

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9293.17

Date of Disbursement

MM	DD	YY
12	05	2003

Amount of Each Disbursement this Period

40.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Marriott Hotel on the River

Mailing Address Canal Street

City
New OrleansState
LA

Zip Code

Purpose of Disbursement
Travel/Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.18

Date of Disbursement

11	14	2003
----	----	------

Amount of Each Disbursement this Period

103.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Chilli's Restaurant

Mailing Address 1734 W. Pinhook Road

City
LafayetteState
LAZip Code
70506Purpose of Disbursement
Meals

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.19

Date of Disbursement

12	16	2003
----	----	------

Amount of Each Disbursement this Period

18.42

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hilton Towers

Mailing Address 1521 N.

City

State

Zip Code

Purpose of Disbursement
Lodging/Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9293.20

Date of Disbursement

12	16	2003
----	----	------

Amount of Each Disbursement this Period

101.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Four Seasons Hotels

Mailing Address 1300 Lamar Street

City
HoustonState
TXZip Code
77010

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9293.21

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

519.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GMAC Payment Processing Center

Mailing Address Post Office Box 630071

City
DallasState
TXZip Code
75263-0071Purpose of Disbursement
Lease

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9244

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

735.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Hertz-Rent-A-Car

Mailing Address Airport

City
RichmondState
VA

Zip Code

Purpose of Disbursement
Travel: auto Rental

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9367

Date of Disbursement

10	05	2003
----	----	------

Amount of Each Disbursement this Period

1015.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1751.28

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address

City
MemphisState
TNZip Code
37501

Purpose of Disbursement

Quarterly Tax Deposit

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2004

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9374

Date of Disbursement

12 / 15 / 2003

Amount of Each Disbursement this Period

597.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. J & J Printing, Inc.

Mailing Address 5540 Port Royal Road

City
SpringfieldState
VAZip Code
22151

Purpose of Disbursement

Campaign Materials

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2004

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9177

Date of Disbursement

12 / 17 / 2003

Amount of Each Disbursement this Period

1813.08

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. KBEB

Mailing Address Post Office Box 248

City
CrowleyState
LAZip Code
70527-0248

Purpose of Disbursement

Advertisement

Candidate Name

Category/
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2004

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9196

Date of Disbursement

11 / 18 / 2003

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2470.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. KSIG

Mailing Address Post Office Box 248

City	State	Zip Code
Crowley	LA	70527-0248

Purpose of Disbursement

Advertisement

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9195

Date of Disbursement

MM	DD	YY
10	06	2003

Amount of Each Disbursement This Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. KSIG

Mailing Address Post Office Box 248

City	State	Zip Code
Crowley	LA	70527-0248

Purpose of Disbursement

Advertisement

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9200

Date of Disbursement

MM	DD	YY
11	18	2003

Amount of Each Disbursement This Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Louisiana Department of Labor

Mailing Address Post Office Box 94050

City	State	Zip Code
Baton Rouge	LA	70804

Purpose of Disbursement

Quarterly Tax Deposit

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9375

Date of Disbursement

MM	DD	YY
12	15	2003

Amount of Each Disbursement This Period

14.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

214.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Louisiana Department of Revenue

Mailing Address Post Office Box 3440

City
Baton RougeState
LAZip Code
70823-3440Purpose of Disbursement
Quarterly Taxes

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9373

Date of Disbursement

MM	DD	YY
12	15	2003

Amount of Each Disbursement this Period

63.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Meals of Art

Mailing Address 18911 Premiere Court

City
GaithersburgState
MDZip Code
20879Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9258

Date of Disbursement

MM	DD	YY
10	01	2003

Amount of Each Disbursement this Period

1431.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Metrocall

Mailing Address 8480-A Airline Highway

City
Baton RougeState
LAZip Code
70815Purpose of Disbursement
Lease

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9246

Date of Disbursement

MM	DD	YY
10	07	2003

Amount of Each Disbursement this Period

32.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1627.22

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Metrocall

Mailing Address 9490-A Airline Highway

City Baton Rouge

State LA

Zip Code 70815

Purpose of Disbursement

Lease

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9248

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

78.54

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Metrocall

Mailing Address 9490-A Airline Highway

City Baton Rouge

State LA

Zip Code 70815

Purpose of Disbursement

Lease

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9249

Date of Disbursement

12	08	2003
----	----	------

Amount of Each Disbursement this Period

35.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. National Democratic Club

Mailing Address 30 Ivy Street SE

City Washington

State DC

Zip Code 20003-4071

Purpose of Disbursement

Dues

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9268

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

225.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

338.88

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address Post Office Box 30292

City
Salt Lake CityState
UTZip Code
84130-0292Purpose of Disbursement
Supplies

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9179

Date of Disbursement

12	15	2003
----	----	------

Amount of Each Disbursement this Period

62.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Progressive Insurance Company

Mailing Address Department 0595

City
Carol StreamState
ILZip Code
60132-0595Purpose of Disbursement
Auto Insurance

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9242

Date of Disbursement

11	03	2003
----	----	------

Amount of Each Disbursement this Period

3743.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Rayne Acadian-Tribune

Mailing Address Post Office Box 280

City
RayneState
LAZip Code
70570Purpose of Disbursement
Advertisement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9199

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

330.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4135.12

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (in Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Senate Employee Child Care Center

Mailing Address U. S. Senate

City
WashingtonState
DCZip Code
20510-9022

Purpose of Disbursement

Constituent: Gifts

Candidate Name

☐
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9180

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	3

Amount of Each Disbursement this Period

800.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Carol I. Speer

Mailing Address 2044 Lake Hills Parkway

City
Baton RougeState
LAZip Code
70808-1453

Purpose of Disbursement

Payroll

Candidate Name

☐
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9225

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	3

Amount of Each Disbursement this Period

858.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Carol I. Speer

Mailing Address 2044 Lake Hills Parkway

City
Baton RougeState
LAZip Code
70808-1453

Purpose of Disbursement

Postage/Mails/Gasoline/Maintenance

Candidate Name

☐
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9270

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	1	/	2	0	0	3

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1958.50

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Carol I. Spear

Transaction ID: SB17.9227

Date of Disbursement

11	03	2003
----	----	------

Mailing Address 2044 Lake Hills Parkway

City
Baton RougeState
LAZip Code
70808-1453

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

856.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Carol I. Spear

Transaction ID: SB17.9228

Date of Disbursement

12	02	2003
----	----	------

Mailing Address 2044 Lake Hills Parkway

City
Baton RougeState
LAZip Code
70808-1453

Purpose of Disbursement

Payroll

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

856.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Carol I. Spear

Transaction ID: SB17.9273

Date of Disbursement

12	17	2003
----	----	------

Mailing Address 2044 Lake Hills Parkway

City
Baton RougeState
LAZip Code
70808-1453

Purpose of Disbursement

Postage/Meals/Supplies/Taxi/Photography

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2013.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Splendid Fare

Mailing Address 1310 Braddock Place

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement
Event Expenses

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9256

Date of Disbursement

10	24	2003
----	----	------

Amount of Each Disbursement this Period

788.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. T-Mobile

Mailing Address Post Office Box 742596

City Cincinnati	State OH	Zip Code 45274
--------------------	-------------	-------------------

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9208

Date of Disbursement

10	01	2003
----	----	------

Amount of Each Disbursement this Period

220.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. T-Mobile

Mailing Address Post Office Box 742596

City Cincinnati	State OH	Zip Code 45274
--------------------	-------------	-------------------

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

State: District:

Transaction ID: SB17.9221

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

430.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1439.03

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. The Rayne Independent

Mailing Address Post Office Box 428

City
RayneState
LAZip Code
70576Purpose of Disbursement
Advertisement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9197

Date of Disbursement

MM	DD	YY
12	01	2003

Amount of Each Disbursement this Period

332.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9231

Date of Disbursement

MM	DD	YY
10	01	2003

Amount of Each Disbursement this Period

12.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9234

Date of Disbursement

MM	DD	YY
10	30	2003

Amount of Each Disbursement this Period

43.35

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

387.90

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9233

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	0	5	2	0	0	3

Amount of Each Disbursement this Period

3.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9235

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	1	1	8	2	0	0	3

Amount of Each Disbursement this Period

13.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.9236

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	0	8	2	0	0	3

Amount of Each Disbursement this Period

259.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

276.68

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9237

Date of Disbursement

12	09	2003
----	----	------

Amount of Each Disbursement this Period

10.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9238

Date of Disbursement

12	15	2003
----	----	------

Amount of Each Disbursement this Period

80.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City
Baton RougeState
LAZip Code
70821Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9230

Date of Disbursement

12	18	2003
----	----	------

Amount of Each Disbursement this Period

32.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

123.19

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City	State	Zip Code
Baton Rouge	LA	70821

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9241

Date of Disbursement

M	D	Y
12	18	2003

Amount of Each Disbursement this Period

32.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. U. S. Postmaster

Mailing Address Main Branch, 251 Florida Street

City	State	Zip Code
Baton Rouge	LA	70821

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9240

Date of Disbursement

M	D	Y
12	19	2003

Amount of Each Disbursement this Period

19.91

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. U. S. Senate Restaurant

Mailing Address First & C Streets, N.E.

City	State	Zip Code
Washington	DC	20510

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State:

District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9254

Date of Disbursement

M	D	Y
11	03	2003

Amount of Each Disbursement this Period

186.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

238.83

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. U. S. Senate Restaurant

Mailing Address First & C Streets, N.E.

City
WashingtonState
DCZip Code
20510

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9255

Date of Disbursement

12	01	2003
----	----	------

Amount of Each Disbursement this Period

358.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address Post Office Box 860108

City
DallasState
TXZip Code
75286-0108

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9217

Date of Disbursement

10	08	2003
----	----	------

Amount of Each Disbursement this Period

191.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address Post Office Box 860108

City
DallasState
TXZip Code
75286-0108

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.9212

Date of Disbursement

10	07	2003
----	----	------

Amount of Each Disbursement this Period

235.49

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

785.33

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address Post Office Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9213

Date of Disbursement

MM	DD	YY
11	03	2003

Amount of Each Disbursement This Period

182.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address Post Office Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9214

Date of Disbursement

MM	DD	YY
12	01	2003

Amount of Each Disbursement This Period

267.09

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address Post Office Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9215

Date of Disbursement

MM	DD	YY
12	08	2003

Amount of Each Disbursement This Period

196.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

655.98

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address Post Office Box 660108

City	State	Zip Code
Dallas	TX	75268-0108

Purpose of Disbursement

Telephone

Candidate Name

☐
Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9218

Date of Disbursement

MM	DD	YY
12	10	2003

Amount of Each Disbursement this Period

163.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Washington Tennis Foundation

Mailing Address 16th & Kennedy Streets NW

City	State	Zip Code
Washington	DC	20011

Purpose of Disbursement

Dues

Candidate Name

☐
Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

State: District:

Disbursement For:	2004
☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID: SB17.9267

Date of Disbursement

MM	DD	YY
12	15	2003

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

663.38

TOTAL This Period (last page this line number only) ▶

73340.21

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Donald Alexander

Transaction ID: SB20A.9090

Date of Disbursement

M	D	Y
12	31	2003

Mailing Address 1333 New Hampshire Avenue NW

City	State	Zip Code
Washington	DC	20036

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Carol P. Berman

Transaction ID: SB20A.9091

Date of Disbursement

M	D	Y
12	31	2003

Mailing Address 2801 New Mexico Avenue NW

City	State	Zip Code
Washington	DC	20007

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. William V. Brieme, Jr.

Transaction ID: SB20A.9092

Date of Disbursement

M	D	Y
12	31	2003

Mailing Address 1803 Nicholson Lane

City	State	Zip Code
Alexandria	VA	22302-4112

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

☐ Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Duane Connell

Mailing Address Post Office Box 446

City
New VernonState
NJZip Code
07976Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9103

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Grover Connell

Mailing Address One Connell Drive

City
Berkeley HeightsState
NJZip Code
07922Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9104

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Patricia Connell

Mailing Address 207 Watchung Fork

City
WesterfieldState
NJZip Code
07090Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9105

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Shane Connell

Transaction ID: SB20A.9106

Date of Disbursement

M	D	Y	M	D	Y
1	2		3	1	2003

Mailing Address 24 Independence Drive

City	State	Zip Code
Basking Ridge	NJ	07920

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Ted Connell

Transaction ID: SB20A.9107

Date of Disbursement

M	D	Y	M	D	Y
1	2		3	1	2003

Mailing Address One Connell Drive

City	State	Zip Code
Berkeley Heights	NJ	07922

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Terry Connell

Transaction ID: SB20A.9108

Date of Disbursement

M	D	Y	M	D	Y
1	2		3	1	2003

Mailing Address One Connell Drive

City	State	Zip Code
Berkeley Heights	NJ	07922

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Coushatta Tribe of Louisiana

Mailing Address Post Office Box 618

City

Elton

State

LA

Zip Code

70632

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9124

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Stanton Dosselt, II

Mailing Address Post Office Box 1795

City

Shreveport

State

LA

Zip Code

71165

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9120

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. James SW Drewry

Mailing Address 3317 Wessington Way

City

Alexandria

State

VA

Zip Code

22309-2228

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9083

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

400.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Noel Gould

Mailing Address 701 Pennsylvania Avenue NW

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9109

Date of Disbursement

N 12	M 31	Y 2003
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

B. Frederick H. Graefe

Mailing Address Hunton & Williams
1900 K Street NW

City Washington	State DC	Zip Code 20006-1109
--------------------	-------------	------------------------

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9110

Date of Disbursement

N 12	M 31	Y 2003
---------	---------	-----------

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

Full Name (Last, First, Middle Initial)

C. Benjamin H. Harris

Mailing Address 160 Riverside Drive
Apt. 14A

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9095

Date of Disbursement

N 12	M 31	Y 2003
---------	---------	-----------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.63

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. David B. Harris

Mailing Address 25 W. 81st Street
Apt. 4B

City New York State NY Zip Code 10024

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9096

Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Emily B. Harris

Mailing Address 25 West 81st Street
Apt. 4B

City New York State NY Zip Code 10024

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9097

Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Hillary G. Harris

Mailing Address 160 Riverside Drive
Apt. 14A

City New York State NY Zip Code 10024

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9098

Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Irving B. Harris

Mailing Address 209 E. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60611

 Purpose of Disbursement
 Refund of General Election Contribution
 Candidate Name
Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼
Transaction ID: SB20A.9099
Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Roberta H. Harris

Mailing Address 6 Longfellow Park

City	State	Zip Code
Cambridge	MA	02138

 Purpose of Disbursement
 Refund of General Election Contribution
 Candidate Name
Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼
Transaction ID: SB20A.9100
Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. William W. Harris

Mailing Address 6 Longfellow Park

City	State	Zip Code
Cambridge	MA	02138

 Purpose of Disbursement
 Refund of General Election Contribution
 Candidate Name
Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼
Transaction ID: SB20A.9101
Date of Disbursement

MM	DD	YY
12	31	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Ronald M. Lamarque

Mailing Address 3101 Williams Blvd.

City
KennerState
LAZip Code
70065Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9122

Date of Disbursement

12	31	2003
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Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Claude Leach

Mailing Address Post Office Box 897

City

Lake Charles

State

LA

Zip Code

70602

Purpose of Disbursement
Refund of In-Kind General Election Cont

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9123

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

148.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Edward Markle

Mailing Address 126 Lakewood Estates Drive

City

New Orleans

State

LA

Zip Code

70131

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9115

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2148.44

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Gloria Markle

Mailing Address 126 Lakewood Estates Drive

City
New OrleansState
LAZip Code
70131

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9118

Date of Disbursement

M	D	Y
12	31	2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Victoria Hearin Preis

Mailing Address 4811 Claycut Road

City
Baton RougeState
LAZip Code
70808

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9125

Date of Disbursement

M	D	Y
12	31	2003

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. John W. Rogers, Jr

Mailing Address 200 E. Randolph Drive
#2900City
ChicagoState
ILZip Code
60601

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20A.9114

Date of Disbursement

M	D	Y
12	31	2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Lawrence Rybka

Mailing Address 1500 Corporate Center Way
Suite 203

City Wellington State FL Zip Code 33414

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9111

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ronald Silver

Mailing Address 12000 Biscayne Blvd.
411

City North Miami State FL Zip Code 33151

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9128

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Lynda Steere

Mailing Address 54 Island Drive

City Rye State NY Zip Code 10580

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.9112

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. William C Steere, Jr

Mailing Address 235 E. 42nd Street

City	State	Zip Code
New York	NY	10017

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.8113

Date of Disbursement

12	31	2003
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Pamela J. Wise

Mailing Address 2824 Woodfield Drive

City	State	Zip Code
Maryville	IL	62062-2830

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	2004
	☐ Primary ☒ General
	☐ Other (specify) ▼

State: District:

Transaction ID: SB20A.8102

Date of Disbursement

12	31	2003
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Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

47348.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (in Full)
John Breaux Committee

Full Name (Last, First, Middle Initial)

A. ACE INA POLITICAL ACTION COMMITTEEMailing Address Two Liberty Place
1601 Chesnut St. TL36P

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9142

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address WORLDWIDE HEADQUARTERS

City COLUMBUS State GA Zip Code 31909

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9188

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. AMERICAN CHEMISTRY COUNCIL PACMailing Address 1300 WILSON BOULEVARD
ATTN: LESLIE KAPLAN

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9143

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. AMERICAN SUGARBEET GROWERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1156 15TH ST NW SUITE 1101

City
WASHINGTONState
DCZip Code
20005

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. AMERICAN WATERWAYS OPERATORS-PACMailing Address 801 North Quincy Street
Suite 200City
ARLINGTONState
VAZip Code
22203

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9144

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. AMGEN INC POLITICAL ACTION COMMITTEE

Mailing Address 1300 EYE STREET NW SUITE 470 EAST

City
WASHINGTONState
DCZip Code
20005

Purpose of Disbursement

Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9170

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 20a	☐ 20b	☒ 20c	☐ 21

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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HO-MEDCO INC PAC

Mailing Address 26220 ENTERPRISE COURT

City
LAKE FORESTState
CAZip Code
92830Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9146

Date of Disbursement

12	31	2003
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Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. AVENTIS PASTEUR POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 187

City
SWIFTWATERState
PAZip Code
18370Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9171

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. BELL SOUTH CORPORATION EMPLOYEES' FEDERAL POLITICAL ACTION COMMITTEEMailing Address 1155 Peachtree St. NE
14DD3City
AtlantaState
GAZip Code
30308Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9172

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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☐ 17	☐ 18	☐ 18a	☐ 19b
☐ 20a	☐ 20b	☒ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. CARDINAL HEALTH INC POLITICAL ACTION COMMITTEE

Mailing Address 7000 CARDINAL PLACE

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement
Refund of General Election Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼Transaction ID: SB20C.9153
Date of DisbursementMM / DD / YYYY
12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. CELLULAR TELECOMMUNICATIONS & INTERNET ASSOC PAC FKA CELLULAR TELECOMMUNICATIONS IND PAC

Mailing Address 1250 CONNECTICUT AVE (NW) STE 800

City WASHINGTON State DC Zip Code 20038

Purpose of Disbursement
Refund of General Election Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼Transaction ID: SB20C.9147
Date of DisbursementMM / DD / YYYY
12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. CINGULAR WIRELESS LLC EMPLOYEE PACMailing Address 5565 GLENRIDGE CONNECTOR
SUITE 1700

City ATLANTA State GA Zip Code 30342

Purpose of Disbursement
Refund of General Election Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼Transaction ID: SB20C.9154
Date of DisbursementMM / DD / YYYY
12 / 31 / 2003

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE (PATH-PAC)

Mailing Address 1350 EYE STREET NW SUITE 590

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9155

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. DASCHLE VICTORY FUND 2002

Mailing Address 821 NORTH MAPLE

City
WATERTOWNState
SDZip Code
57201Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: SD District: 00

Transaction ID: SB20C.9156

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. EL PASO CORPORATION PACMailing Address 555 11TH STREET NW
SUITE 750City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9157

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	3

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. ENTERGY CORPORATION POLITICAL ACTION COMMITTEE 'ENPAC'

Mailing Address 425 West Capitol Avenue Suite 40B

City	State	Zip Code
Little Rock	AR	72203

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9185

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

2553.89

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELONPAC)Mailing Address 1 FINANCIAL PLACE
440 S. LA SALLE ST. 33RD FLOOR

City	State	Zip Code
CHICAGO	IL	60605

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9158

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXX-MOBIL PAC)

Mailing Address 1301 FANNIN ST SUITE 2215

City	State	Zip Code
HOUSTON	TX	77002

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9148

Date of Disbursement

12	31	2003
----	----	------

Amount of Each Disbursement this Period

1200.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5753.89

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. FEDERATION OF AMERICAN HOSPITALS PAC (FEDPAC); (FKA AMERICAN HEALTH SYSTEMS PAC)

Mailing Address 801 PENNSYLVANIA AVENUE SUITE 245

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9149

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	3	1

Amount of Each Disbursement this Period

1428.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEEMailing Address 1289 Pennsylvania Ave NW
STE 1100City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9150

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	3	1

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. GREAT LAKES DREDGE & DOCK COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 2122 YORK ROAD

City
OAK BROOKState
ILZip Code
60523Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2004

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB20C.9151

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	3	1

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2928.74

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. HEALTH INSURANCE POLITICAL ACTION COMMITTEE OF THE HEALTH INSURANCE ASSOCIATION OF AMERICAMailing Address 1201 F Street NW
Suite 500City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9152

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	0	3

Amount of Each Disbursement This Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 First Street SE Suite 300

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9129

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	0	3

Amount of Each Disbursement This Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Johnson & Johnson

Mailing Address One Johnson & Johnson Plaza

City
New BrunswickState
NJZip Code
08933-7204Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9175

Date of Disbursement

M	D	Y	M	D	Y
1	2	2	0	0	3

Amount of Each Disbursement This Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. JONES, WALKER, WAECHTER, POITEVENT, CARRERE & DENEGRÉ
POLITICAL ACTION COMMITTEE

Mailing Address 201 ST CHARLES AVENUE 49TH FLOOR

City
NEW ORLEANSState
LAZip Code
70170Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9140

Date of Disbursement

M	M	Y	Y	Y	Y
1	2	3	1	2	0
2003					

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. KERREY FOR U S SENATE COMMITTEE

Mailing Address 7602 PACIFIC STREET LL #103
7602 PACIFIC STCity
OMAHAState
NEZip Code
68114Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District: 00

Transaction ID: SB20C.9167

Date of Disbursement

M	M	Y	Y	Y	Y
1	2	3	1	2	0
2003					

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. KIDSPAC

Mailing Address 80 Trowbridge Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9134

Date of Disbursement

M	M	Y	Y	Y	Y
1	2	3	1	2	0
2003					

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEEMailing Address 680 South Fourth Street
ONE VENCOR PLACE

City Louisville State KY Zip Code 40202

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9135

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. MASTERS, MATES AND PILOTS POLITICAL CONTRIBUTION FUND

Mailing Address 700 MARITIME BLVD SUITE 500

City LINTHICUM HEIGHTS State MD Zip Code 21080

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9136

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND AMailing Address 27-01 Queens Plaza North Area 4-D
Area 4D

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9137

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. MINN-DAK FARMERS COOPERATIVE POLITICAL ACTION COMMITTEE (MDFPAC)

Mailing Address 7525 RED RIVER ROAD

City
WAMPETONState
NDZip Code
58075Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9158

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. NATIONAL ASSOCIATION OF INDEPENDENT INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 RIVER RD.

City
DES PLAINESState
ILZip Code
60018Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9139

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET NW SUITE 540

City
WASHINGTONState
DCZip Code
20038Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9173

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. NOVA CHEMICALS INC. AND NOVA CHEMICAL SERVICES INC. COMMITTEE FOR POLITICAL ACTION AND EMailing Address 1550 CORADOLIS HTS ROAD
2000 CLIFF MINE ROADCity State Zip Code
MOON TOWNSHIP PA 15108Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9133

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. PFIZER INC. PAC

Mailing Address 235 EAST 42ND STREET

City State Zip Code
NEW YORK NY 10017Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9132

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE (AKA P&G PAC), THE

Mailing Address One Procter & Gamble Plaza

City State Zip Code
Cincinnati OH 45202Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9182

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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☐ 20a	☐ 20b	☒ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. QWEST COMMUNICATIONS INTERNATIONAL INC POLITICAL ACTION COMMITTEEMailing Address 1020 19th St. NW
Suite 700

City Washington State DC Zip Code 20036

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9160

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. SMITHKLINE BEECHAM CORPORATION GOOD GOVERNMENT FUND

Mailing Address ONE FRANKLIN PLAZA, PO BOX 7929

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9131

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. SOUTHERN MINNESOTA SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City RENVILLE State MN Zip Code 58284

Purpose of Disbursement
Refund of General Election Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB20C.9161

Date of Disbursement

12 / 31 / 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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☐ 20a	☐ 20b	☒ 20c	☐ 21

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NAME OF COMMITTEE (In Full)
John Breauz Committee

Full Name (Last, First, Middle Initial)

A. UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENTMailing Address 600 13th St. NW
Suite 340

City Washington State DC Zip Code 20005

Purpose of Disbursement
Refund of General Election Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB20C.9164

Date of Disbursement

M M , D D , Y Y Y Y
12 31 2003

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE

Mailing Address 55 Glenlake Parkway N.E.

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Refund of General Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB20C.9130

Date of Disbursement

M M , D D , Y Y Y Y
12 31 2003

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. USA RICE FEDERATION POLITICAL ACTION COMMITTEE

Mailing Address 4301 NORTH FAIRFAX DRIVE SUITE 305

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
Refund of General Election Contribution
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: 2004
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB20C.9174

Date of Disbursement

M M , D D , Y Y Y Y
12 31 2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

71682.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. ALASKA DEMOCRATIC PARTY

Mailing Address PO Box 104199

City	State	Zip Code
Anchorage	AK	99510

Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.9083

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	3	0	2	0	0	3

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. DSCC-Federal

Mailing Address 430 S. Capitol Street NE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Excess Campaign Funds

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.8178

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	3	0	2	0	0	3

Amount of Each Disbursement this Period

100000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Louisiana Legislative Black Caucus Scholarship Fund

Mailing Address Post Office Box 44003

City	State	Zip Code
Baton Rouge	LA	70804

Purpose of Disbursement
Scholarship Fund Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.9264

Date of Disbursement

M	M	D	D	Y	Y	Y	Y
1	2	0	1	2	0	0	3

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

103500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (in Full)

John Breau Committee

Full Name (Last, First, Middle Initial)

A. Louisiana Youth Seminar

Mailing Address Post Office Box 17509

City
Baton RougeState Zip Code
LA 70899Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.9085

Date of Disbursement

M	D	Y
12	01	2003

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. MAINSTREAM AMERICA POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 4287

City
BATON ROUGEState Zip Code
LA 70821Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.9081

Date of Disbursement

M	D	Y
12	26	2003

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Tony Knowles for U. S. Senate

Mailing Address 236 Massachusetts Avenue NE
Suite 408City
WashingtonState Zip Code
DC 20002Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2004
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.9088

Date of Disbursement

M	D	Y
12	10	2003

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

111500.00

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24020080500

JOHN BREBAUX SENATE COMMITTEE
Post Office Box 4042
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