

2000 DEC 11 P 2:21

1. NAME OF COMMITTEE (In full) <b>Chris John For Congress Committee INC</b>		2. FEC IDENTIFICATION NUMBER <b>CD0316596</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>P.O. Drawer 307</b>		
CITY, STATE and ZIP CODE <b>Crowley, LA 70527</b>	STATE/DISTRICT <b>LA 07</b>	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

**4. TYPE OF REPORT**

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____ <input checked="" type="checkbox"/> 30-Day Post-Election Report following the General Election on <u>11/7/2000</u> in the State of <u>LA</u> <input type="checkbox"/> Termination Report
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This Report Contains Activity For:  Primary Election  General Election  Special Election  Runoff Election

**SUMMARY**

6. Covering Period <u>10/19/2000</u> through <u>11/27/2000</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
8. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$73,925.00	\$374,548.20
(b) Total Contribution Refunds (from Line 20(d))	\$0.00	\$2,500.00
(c) Net Contributions (other than loans) (subtract Line 8(b) from Line 8(a))	\$73,925.00	\$372,048.20
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$25,174.16	\$245,189.42
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$43.48
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$25,174.16	\$245,145.94
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$213,280.63	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

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

Type or Print Name of Treasurer <b>Kenneth Dugas</b>	
Signature of Treasurer	Date <b>12/5/2000</b>

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

# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) **Chris John For Congress Committee INC**      Report Covering the Period: **From: 10/18/2000 To: 11/27/2000**  
 C00316596

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) .....	\$30,900.00		11(a)(i)
(ii) Unitemized .....	\$7,725.00		11(a)(ii)
(iii) Total of Contributions from individuals .....	\$38,625.00	\$147,700.40	11(a)(iii)
(b) Political Party Committees .....	\$0.00	\$0.00	11(b)
(c) Other Political Committees (such as PACs) .....	\$35,300.00	\$226,847.80	11(c)
(d) The Candidate .....	\$0.00	\$0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)(ii)(iii)(b)(c)(d) and (e)) .....	\$73,925.00	\$374,548.20	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEE .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>12</b>
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	13(a)
(b) All Other Loans .....	\$0.00	\$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b)) .....	\$0.00	\$0.00	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Postages, etc.) .....</b>	<b>\$0.00</b>	<b>\$43.48</b>	<b>14</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>15</b>
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15) .....</b>	<b>\$73,925.00</b>	<b>\$374,591.68</b>	<b>16</b>
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES .....</b>	<b>\$25,174.16</b>	<b>\$245,189.42</b>	<b>17</b>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>18</b>
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate .....	\$0.00	\$0.00	19(a)
(b) Of All Other Loans .....	\$0.00	\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) .....	\$0.00	\$0.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees .....	\$0.00	\$1,500.00	20(a)
(b) Political Party Committees .....	\$0.00	\$0.00	20(b)
(c) Other Political Committees (such as PACs) .....	\$0.00	\$1,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c)) .....	\$0.00	\$2,500.00	20(d)
<b>21. OTHER DISBURSEMENTS .....</b>	<b>\$79,540.00</b>	<b>\$179,502.46</b>	<b>21</b>
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21) .....</b>	<b>\$104,714.16</b>	<b>\$427,191.88</b>	<b>22</b>

## III. CASH SUMMARY

<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....</b>	<b>\$244,069.79</b>	<b>23</b>
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16) .....</b>	<b>\$73,925.00</b>	<b>24</b>
<b>25. SUBTOTAL (add Line 23 and Line 24) .....</b>	<b>\$317,994.79</b>	<b>25</b>
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....</b>	<b>\$104,714.16</b>	<b>26</b>
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) .....</b>	<b>\$213,280.63</b>	<b>27</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 7

FOR LINE NUMBER:

11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)

**Chris John For Congress Committee INC**

**C00318598**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>Beit, Richard E.</b>  <b>2019 Beumer</b>  <b>Stuttgart AR 72160</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Riceland Foods Lake Charles</p> <p>Occupation                      President</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year)                      10/26/2000</p>	<p>Amount of Each Receipt this Period                      \$1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>Brousseau, Harry</b>  <b>7025 Shadow Lane</b>  <b>Lake Charles LA 70605</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Cameron State Bank</p> <p>Occupation                      President</p> <p>Aggregate Year-to-Date &gt; \$600.00</p>	<p>Date (month, day, year)                      10/30/2000</p>	<p>Amount of Each Receipt this Period                      \$600.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>Cimini, Vaughn</b>  <b>110 Veterans Memorial Blvd Ste 100</b>  <b>Metsire LA 70005</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Cimini and Associates</p> <p>Occupation                      Attorney</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year)                      11/7/2000</p>	<p>Amount of Each Receipt this Period                      \$250.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>Clayton, Clifford, Jr.</b>  <b>3816 Pecan Dr</b>  <b>Chalmette LA 70043</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Steamship Pilots Association</p> <p>Occupation                      President</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year)                      11/7/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>Comeaux, Bridget</b>  <b>813 Bee Tree St</b>  <b>Westlake LA 70669</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      None</p> <p>Occupation                      Housewife</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      10/30/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>  <b>Craton, John F.</b>  <b>211 N Parkerson</b>  <b>Crowley LA 70527</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Barousse and Craton</p> <p>Occupation                      Attorney</p> <p>Aggregate Year-to-Date &gt; \$200.00</p>	<p>Date (month, day, year)                      10/30/2000</p>	<p>Amount of Each Receipt this Period                      \$200.00                      MEMO                      Partnership                      Attributed</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>  <b>Dhemecourt, Robert</b>  <b>148 Hollywood Dr.</b>  <b>Metsire LA 70005</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Self Employed</p> <p>Occupation                      Lobbyist</p> <p>Aggregate Year-to-Date &gt; \$1,500.00</p>	<p>Date (month, day, year)                      11/7/2000</p>	<p>Amount of Each Receipt this Period                      \$1,000.00</p>

SUBTOTAL of Receipts This Page (optional)

\$3,850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate sheets for each category of the Detailed Summary Page

PAGE 2 OF 7  
FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Diaz, Paul</b> 107 Potomac Caretiro LA 70520 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	PDB Occupation: <b>General Manager</b> Aggregate Year-to-Date > \$250.00	11/2/2000	\$250.00
<b>Dore, William, Sr.</b> P.O. Box 67 Sulphur LA 70664 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Global Industries, Inc. Occupation: <b>President</b> Aggregate Year-to-Date > \$1,000.00	11/2/2000	\$1,000.00
<b>Drake, Walker, Jr.</b> P.O.Box 1519 Chalmette LA 70044 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Self Occupation: <b>Attorney</b> Aggregate Year-to-Date > \$500.00	11/7/2000	\$500.00
<b>Fontenot, Mark</b> 320 Oak St. Lafayette LA 70506 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Shureties Inc. Occupation: <b>Owner</b> Aggregate Year-to-Date > \$1,000.00	10/26/2000	\$1,000.00
<b>Goodson, Charles T.</b> P.O. Box 52482 Lafayette LA 70505 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Goodson Exploration Occupation: <b>Oil and Gas Producer</b> Aggregate Year-to-Date > \$1,000.00	11/7/2000	\$1,000.00
<b>Goodson, Jeanne</b> P.O. Box 52482 Lafayette LA 70505 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	None Occupation: <b>Housewife</b> Aggregate Year-to-Date > \$1,000.00	11/7/2000	\$1,000.00
<b>Hanchey, Jerald</b> 101 Eton Circle Lafayette LA 70508 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	H and S Construction Occupation: <b>Owner</b> Aggregate Year-to-Date > \$500.00	11/2/2000	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$5,250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 7  
FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Hegener, Stanley</b> 1417 Musser Rd Lake Charles LA 70611	IMTC	11/7/2000	\$800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation President Aggregate Year-to-Date > \$800.00		
<b>Inham, Charles</b> 15729 Hwy 190 Opaloussas LA 70570	Jim Tatman Mobile Home	10/30/2000	\$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Salesman Aggregate Year-to-Date > \$600.00		
<b>Jenkins, Monica</b> 2524 May Westlake LA 70668	None	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Housewife Aggregate Year-to-Date > \$1,000.00		
<b>Kastel, David, Dr.</b> 825 W Prion Lake Road Lake Charles LA 70601	Self Employed	11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Dentist Aggregate Year-to-Date > \$500.00		
<b>King, Robert, II</b> 816 Idlewood Lane Lake Charles LA 70605	Pitt Grill	10/30/2000	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Vice President Aggregate Year-to-Date > \$400.00		
<b>Lambert, James</b> 413 Glyndale Ave. Lafayette LA 70506	Curtis and Lambert	11/2/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney Aggregate Year-to-Date > \$1,000.00		
<b>Landry, Margaret</b> 1115 Guillot Rd Youngsville LA 70592	Bayou Housing	10/30/2000	\$650.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Owner Aggregate Year-to-Date > \$650.00		

SUBTOTAL of Receipts This Page (optional)	\$4,950.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 7

FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Langley, Hillary</b> 1312 Green Road Westlake LA 70669	International Longshoremen Ass Occupation Pres and Clerk in Charge	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>Leblanc, Patrick</b> 102 River Bend Circle Lafayette LA 70508	Architect Occupation LeBlanc Group	10/30/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$500.00		
<b>Lockhart, Derek</b> 3512 Walker Rd Walker LA 70785	Self Employed Occupation Contractor	11/7/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>Lockhart, George</b> 33830 Cypress Bluff Denham Springs LA 70726	Self Employed Occupation Contractor	11/7/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>McMillin, Hal</b> 1423 Beech St. Westlake LA 70669	Shaw Construction Occupation Contractor	10/30/2000	\$800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$800.00		
<b>Menard, Don</b> 701 Bernard St. Carencro LA 70520	Dons Country Mart Occupation Owner	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>Mayer, Vernon, Mrs.</b> 1804 Beau Chene Westlake LA 70669	None Occupation Housewife	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$6,300.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions from Individuals**

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NAME OF COMMITTEE (In Full)		C00316596		
<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Milke, Drury</b> <b>302 Laurence Ave</b> <b>Lafayette LA 70503</b>		Name of Employer Offshore Logistics	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Executive	Aggregate Year-to-Date > \$500.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Moncla, Charlie, Jr.</b> <b>P.O. Box 53746</b> <b>Lafayette LA 70505</b>		Name of Employer Moncla Well Service INC	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Owner	Aggregate Year-to-Date > \$1,000.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Morrow, Alice</b> <b>P.O. Drawer 7090</b> <b>Opelousas LA 70570</b>		Name of Employer None	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Housewife	Aggregate Year-to-Date > \$1,000.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Mosley, Guy</b> <b>817 Dolby St</b> <b>Lake Charles LA 70605</b>		Name of Employer United Homes Inc.	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Co-Owner	Aggregate Year-to-Date > \$600.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Mouton, John</b> <b>7198 Mark Lebleu Rd</b> <b>Iowa LA 70647</b>		Name of Employer United Homes Inc.	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Co-Owner	Aggregate Year-to-Date > \$500.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Neel, Hibbett, Jr.</b> <b>8335 Kelwood Ave</b> <b>Baton Rouge LA 70808</b>		Name of Employer Neel-Schaffer, Inc.	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation Engineer	Aggregate Year-to-Date > \$250.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Partnership, Ochsner Clinic, LLC</b> <b>1514 Jefferson Hwy</b> <b>New Orleans LA 70121</b>		Name of Employer	Date (month, day, year) 11/2/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Occupation	Aggregate Year-to-Date > \$2,000.00	

SUBTOTAL of Receipts This Page (optional)	\$4,850.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 7

FOR LINE NUMBER

11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (In Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Panco, Scott</b> 1514 Jefferson Hwy. New Orleans LA 70121	Ochsner Clinic	11/2/2000	\$1,000.00 MEMO Partnership Attributed
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation CEO	Aggregate Year-to-Date > \$2,000.00	
<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Pugh, Lawrence G., III</b> 314 Pine Street New Orleans LA 70118	Montgomery Barnett	11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney	Aggregate Year-to-Date > \$500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Reinauer, David</b> P.O. Box 3755 Lake Charles LA 70602	Reinauer Realty	10/30/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Owner	Aggregate Year-to-Date > \$250.00	
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Rakhi, Alvin</b> 211 Liberty Ave Apt 736 Lafayette LA 70508	Self Employed	10/30/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Physician	Aggregate Year-to-Date > \$250.00	
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Tagg, George</b> 7509 Bybrook Lane Chevy Chase MD 20815	Self Employed	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Consultant	Aggregate Year-to-Date > \$1,000.00	
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Tate, Dan</b> 700 13th Street N.W. Suite 400 Washington DC 20005	Cassidy & Associates	10/30/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Government Affairs	Aggregate Year-to-Date > \$250.00	
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Tate, Daniel C, Jr.</b> 1276 North Wayne Street NO.1225 Arlington VA 22201	Cassidy and Associates	10/30/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Government Affairs Cons	Aggregate Year-to-Date > \$250.00	

SUBTOTAL of Receipts This Page (optional)

\$2,500.00

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 7

FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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

NAME OF COMMITTEE (in Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Trahan, Ritter</b> 22936 Chestnut Kaplan LA 70548	None	11/2/2000	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Retired		Aggregate Year-to-Date > \$400.00
<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Trappay, Alfred, Mrs.</b> 3805 Pina Park Dr Baton Rouge LA 70809	Forté & Tablada	10/30/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Owner		Aggregate Year-to-Date > \$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Wheeler, Jack</b> 4350 Nelson Rd Lake Charles LA 70605	Fraser Morris and Wheeler LLP	10/30/2000	\$100.00 MEMO Partnership Attributed
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney		Aggregate Year-to-Date > \$100.00
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Whiting, John W.</b> 521 East Third Street Crowley LA 70526	Whiting Office Supplies	11/1/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation President		Aggregate Year-to-Date > \$1,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Williams, Karen</b> 3007 Surrey Lane Lake Charles LA 70605	None	10/30/2000	\$800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Housewife		Aggregate Year-to-Date > \$800.00
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Wright, Bob</b> P.O. Box 3668 Lafayette LA 70502	Self Employed	11/2/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney		Aggregate Year-to-Date > \$500.00
<b>Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		Aggregate Year-to-Date >

<b>SUBTOTAL</b> of Receipts This Page (optional)	>	\$3,200.00
<b>TOTAL</b> This Period (last page this line number only)	>	\$30,900.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 7

FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full) **Chris John For Congress Committee INC** **G00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Campaign Fund, Ronnie Johns</b> 3620 Maplewood DR Sulphur LA 70663	State Farm Occupation Insurance Sales	10/30/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$100.00		
<b>Campaign, Harry Lee, Sheriff</b> P.O. Box 188 Gretna LA 70054	Occupation	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
<b>Karam, Richard Campaign Fund</b> P.O. Box 328 Oberlin LA 70655	Occupation	10/30/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$200.00		
<b>Pac, AGC</b> 333 John Carlyle St. Ste. 200 Alexandria VA 22314	Occupation	11/7/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$2,000.00		
<b>Pac, AHCA American Health Care Association</b> 1201 L Street NW Washington DC 20005	Occupation	10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,500.00		
<b>Pac, Allied Domecq Spirits And Wine USA, Inc.</b> P.O. Box 33008 Detroit MI 48232	Occupation	11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$500.00		
<b>Pac, American Sugar Cane League</b> P.O. Box 938 Thibodaux LA 70302	Occupation	11/16/2000	\$2,500.00
Receipt For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$3,500.00		

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	<b>\$6,300.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Schedules Summary Page

**Contributions from Other Political Committees**

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Pac, American Task Force for Lebanon Legislative Council</b> 2213 M Street NW 3rd Floor Washington DC 20005	Legislative Council	11/2/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	
<b>Pac, Anheuser-Busch</b> 1350 Eye Street Ste 690 Washington DC 20005	AB-PAC	11/2/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$500.00	
<b>Pac, APRO</b> 9015 Moutain Ridge Dr Ste 220 Austin TX 78759		11/2/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$500.00	
<b>Pac, Arab American Leadership</b> 918 16th Street NW Suite 804 Washington DC 20008	AALPAC	11/7/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$2,000.00	
<b>Pac, Arch Chemicals Inc Government Participation Fund</b> 501 Merritt Seven Norwalk CT 06856	Participation Fund	11/2/2000	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$300.00	
<b>Pac, Arpac</b> 451 Florida Blvd Baton Rouge LA 70801		11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$1,500.00	
<b>Pac, Bank One Corporation</b> 1 Bank One Plaza Chicago IL 60670		10/30/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-to-Date > \$200.00	

SUBTOTAL of Receipts This Page (optional) ..... \$4,000.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions from Other Political Committees**

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)		C00316596	
<b>A. Full Name, Mailing Address and ZIP Code</b> Pac, Blue The Blue Cross & Blue Shield Association 1310 G Street NW 12th Floor Washington DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/7/2000 Amount of Each Receipt this Period \$500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Pac, Blue Dog P.O. Box 7668 Washington DC 20044 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/3/2000 Amount of Each Receipt this Period \$3,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Pac, Blue Dog P.O. Box 7668 Washington DC 20044 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/1/2000 Amount of Each Receipt this Period \$2,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Pac, Boeing 1200 Wilson Blvd. Arlington VA 22208 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/7/2000 Amount of Each Receipt this Period \$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Pac, Brown And Williamson Tobacco Corp. P.O. Box 35090 Louisville KY 40232 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Employees Political Action Committee EMPAC Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/7/2000 Amount of Each Receipt this Period \$1,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Pac, Burlington Resources 5051 Washalmer Ste 1400 Houston TX 77056 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/2/2000 Amount of Each Receipt this Period \$500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Pac, CF Industries Employees Good Govt Fu One Salem Lake Drive Lake Zurich IL 60047 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Name of Employer Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/30/2000 Amount of Each Receipt this Period \$500.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	\$8,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 4 OF 7

FOR LINE NUMBER 11(c)

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (in Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>Pac, Chitimacha Tribe of Louisiana</b> P.O. Box 861 Charenton LA 70523		10/26/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$1,000.00	
<b>Pac, CMS Energy Employees for Better Govt</b> 212 W Michigan Ave Jackson MI 40201		10/30/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$500.00	
<b>Pac, COLCPE Committee on Letter Carriers Political Education</b> 100 Indiana Avenue NW National Association of Letter Carriers Washington DC 20001		11/7/2000	\$2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation C-002358D		
	Aggregate Year-to-Date >	\$2,500.00	
<b>Pac, Conoco</b> 800 Connecticut Avenue NW Ste 900 Washington DC 20006		11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$500.00	
<b>Pac, CULAC Credit Union Legislative Action Council of</b> 805 Fifteenth Street NW Suite 300 Credit Union National Association Washington DC 20005		11/7/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$1,500.00	
<b>Pac, Devon Energy Corporation</b> 20 N Broadway Ste 1500 Oklahoma City OK 73102		10/30/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$500.00	
<b>Pac, Exxon Mobil Corporation</b> 5959 Las Colinas Blvd. Irving TX 75039		11/2/2000	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation		
	Aggregate Year-to-Date >	\$1,500.00	

SUBTOTAL of Receipts This Page (optional)

\$6,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of this Detailed Summary Page

**Contributions from Other Political Committees**

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NAME OF COMMITTEE (In Full) **Chris John For Congress Committee INC** **C00316598**

<b>A. Full Name, Mailing Address and ZIP Code</b> Pac, Fed Federation of American Health Systems 801 Pennsylvania NW Ste 245 Washington DC 20004	Name of Employer Federation of American Health Systems  Occupation	Date (month, day, year) 11/2/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$1,000.00	

<b>B. Full Name, Mailing Address and ZIP Code</b> Pac, HCA Good Government Fund One Park Plaza Nashville TN 37202	Name of Employer  Occupation	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$500.00	

<b>C. Full Name, Mailing Address and ZIP Code</b> Pac, Law Enforcement Alliance Of America 7700 Leesburg Pike Ste 421 Falls Church VA 22043	Name of Employer  Occupation	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$500.00	

<b>D. Full Name, Mailing Address and ZIP Code</b> Pac, Ltd-ibi The Limited, Inc./Intimated Brands, Inc. Three Limited Pkwy Columbus OH 43230	Name of Employer The Limited, Inc./Intimated Brands, Inc.  Occupation	Date (month, day, year) 10/30/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$500.00	

<b>E. Full Name, Mailing Address and ZIP Code</b> Pac, Nalco Chemical One Nalco Center NalcoPAC Naperville IL 60563	Name of Employer NalcoPAC  Occupation	Date (month, day, year) 11/7/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$500.00	

<b>F. Full Name, Mailing Address and ZIP Code</b> Pac, NRLCA National Rural Letter Carriers' Association 1630 Duke St 4th Floor Alexandria VA 22314	Name of Employer National Rural Letter Carriers' Association  Occupation	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$1,000.00	

<b>G. Full Name, Mailing Address and ZIP Code</b> Pac, Philip Morris Companies, Inc. 120 Park Ave PHIL-PAC New York NY 10017	Name of Employer Philip Morris Companies, Inc.  Occupation	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Aggregate Year-to-Date > \$3,500.00	

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 7

FOR LINE NUMBER

11(c)

**Contributions from Other Political Committees**

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**NAME OF COMMITTEE (In Full)**  
**Chris John For Congress Committee INC** **C00318598**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                  Pac, Ppg Employees Voluntary Political Campaign Fund                  P.O. Box 1000                  Lake Charles LA 70602</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                  11/7/2000</p>	<p>Amount of Each Receipt this Period                  \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                  Pac, Riceland Foods, Inc.                  P.O. Box 927                  Stuttgart AR 72160</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year)                  10/26/2000</p>	<p>Amount of Each Receipt this Period                  \$1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                  Pac, RJR                  P.O. Box 718                  Winston Salem NC 27102</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$4,000.00</p>	<p>Date (month, day, year)                  11/7/2000</p>	<p>Amount of Each Receipt this Period                  \$1,000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                  Pac, Southern Company                  241 Ralph McGill Blvd                  Atlanta GA 30308</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$2,000.00</p>	<p>Date (month, day, year)                  10/24/2000</p>	<p>Amount of Each Receipt this Period                  \$1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                  Pac, Texaco Political Involvement Committee                  1050 17th St                  Washington DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,500.00</p>	<p>Date (month, day, year)                  11/7/2000</p>	<p>Amount of Each Receipt this Period                  \$500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                  Pac, The Home Depot, Inc. Better Government Committee                  2455 Pacas Ferry Rd NW                  Atlanta GA 30339</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                  10/30/2000</p>	<p>Amount of Each Receipt this Period                  \$500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                  Pac, The Orthopedic The American Association of Orthopaedic Surgeons                  317 Massachusetts Ave NE                  Washington DC 20002</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                  Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year)                  11/2/2000</p>	<p>Amount of Each Receipt this Period                  \$1,000.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>\$5,500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

**Contributions from Other Political Committees**

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

<b>A. Full Name, Mailing Address and ZIP Code</b> Pac, Uepac United Employees' Political Action Committee, Inc. P.O. Box 5000 Central Louisiana Electrical Company, Inc. Pinaville LA 71361	<b>Name of Employer</b> Occupation	<b>Date (month, day, year)</b> 10/30/2000	<b>Amount of Each Receipt this Period</b> \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$500.00		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>Full Name, Mailing Address and ZIP Code</b>	<b>Name of Employee</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	\$500.00
<b>TOTAL This Period (last page this line number only)</b> .....	\$35,300.00



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 12

FOR LINE NUMBER

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**Operating Expenditures**

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

NAME OF COMMITTEE (in Full) **Chris John For Congress Committee INC** C00316598

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Acadian Trophies 1801 Moss St. Lafayette LA 70501	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/16/2000	\$80.08
B. Full Name, Mailing Address and ZIP Code Accent Annex 1200 Sams Ave F New Orleans LA 70123	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$182.82
C. Full Name, Mailing Address and ZIP Code Alfred, James 107 Springfield Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$120.00
D. Full Name, Mailing Address and ZIP Code Alfred, James 107 Springfield Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$50.00
E. Full Name, Mailing Address and ZIP Code Alfred, James 107 Springfield Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/20/2000	\$168.00
F. Full Name, Mailing Address and ZIP Code Alfred, Kevin 104 Springfield Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$72.00
G. Full Name, Mailing Address and ZIP Code Alfred, M.A. 107 Springfield Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/20/2000	\$50.00
H. Full Name, Mailing Address and ZIP Code Athletic Center 4205 N Airline Hwy Gonzales LA 70737	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$1,148.90
I. Full Name, Mailing Address and ZIP Code Bayou Bend P.O. Box 285 Crowley LA 70527	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$1,264.00

SUBTOTAL of Disbursements This Page (optional) ..... \$3,135.80

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

**Operating Expenditures**

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

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Bed Bath And Beyond</b> 6642 Loisdale Blvd Springfield VA 22150	<b>Pundraising Expense</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$261.89
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Ballsouth</b> P.O. Box 100100 Columbia SC 29202	<b>Office Expenses</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/15/2000	\$111.94
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Ballsouth,</b> P.O. Box 100100 Columbia SC 29202	<b>Purpose of Disbursement</b> MEMO \$78.27 Reimb to Kim Turnley for phone Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$0.00
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Big Wheel Novelties</b> 2440 Veterans Blvd Kenner LA 70062	<b>Office Expenses</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$550.99
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Broussard Poche Lewis and Brea</b> P.O. Drawer 971 Crowley LA 70527	<b>Accounting Services</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$1,300.00
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Chevron</b> 575 Market Street San Francisco, CA 94105	<b>Travel Expense</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$32.17
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Chilis C568</b> Treasurer's best effort	<b>Dining</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$25.92
<b>H. Full Name, Mailing Address and ZIP Code</b> <b>Chilis Grill and Bar</b> 3205 Gerstner Memorial Lake Charles LA 70601	<b>Pundraising Expense</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$12.08
<b>I. Full Name, Mailing Address and ZIP Code</b> <b>Chubank AAdvantage</b> P.O. Box 8501 Hagerstown MD 21745	<b>Finance Charge</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$80.77

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>\$2,375.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER

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**Operating Expenditures**

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

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Complete Stop</b> 1551 SE Evangeline Thruway Lafayette, LA	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$20.14
<b>Crowley Post Signal</b> 602 N Parkerson Avenue Crowley LA 70527	Print Ads Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$127.50
<b>CrowleyTown Club</b> P.O. Box 563 Crowley LA 70527	Dining Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/19/2000	\$76.43
<b>Deanos</b> 305 Bertrand Dr. Lafayette LA 70505	Dining Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$19.51
<b>Delcambre Fuel Depot,</b> 814 Hwy 14 West Delcambre LA 70528	MEMO \$33.57 Reimb to Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$0.00
<b>Dillards</b> 5725 Johnston Lafayette LA 70503	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$85.46
<b>Dons Seafood House</b> 301 E Vermillion Lafayette LA 70501	Dining Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$41.85
<b>Dons Specialty Meats,</b> Hwy 726 and 1-49 Frontage Rd Carenro LA 70520	MEMO \$81.12 Reimb to Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00
<b>Doug Ashy,</b> 4950 Johnston St. Lafayette LA 70503	MEMO \$5.85 Reimb to Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00

SUBTOTAL of Disbursements This Page (optional) **\$370.89**

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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NAME OF COMMITTEE (In Full) **Chris John For Congress Committee INC** C00318598

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Doyles Mini Warehouse Storage 404 S Parkerson Crowley LA 70526	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$90.00
B. Full Name, Mailing Address and ZIP Code Dupuis, Chad 509 Acorn Dr. Carencro LA 70520	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/20/2000	\$91.00
C. Full Name, Mailing Address and ZIP Code Dupuis, Dale 100 Nova Scotia Lafayette LA 70507	Reimb For Office Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$206.82
D. Full Name, Mailing Address and ZIP Code Dupuis, Dale 100 Nova Scotia Lafayette LA 70507	Reimb For Office Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$204.95
E. Full Name, Mailing Address and ZIP Code Dupuis, Lindsey 1849 Savoy Rd Youngsville LA 70592	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/26/2000	\$70.00
F. Full Name, Mailing Address and ZIP Code Econo Mart Hwy 14 Kaplan LA 70548	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$64.59
G. Full Name, Mailing Address and ZIP Code Evangeline Bank 425 North Avenue G Crowley LA 70527	Taxes Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/15/2000	\$318.90
H. Full Name, Mailing Address and ZIP Code Exxon 2587 Parkerson Crowley LA 70526	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$40.93
I. Full Name, Mailing Address and ZIP Code Exxon Pos 75 520 W Summers Abbeville LA 70510	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$44.87

SUBTOTAL of Disbursements This Page (optional) .....	\$1,132.06
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Exxon Pos 75 520 W Summers Abbeville LA 70510	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$23.54
Exxon Pos 75, 520 W Summers Abbeville LA 70510	MEMO \$25.00 Reimb to <sup>Wagner</sup> Dale Dupuis for office	11/17/2000	\$0.00
Fedex P.O. Box 1140 Dept A. Memphis TN 38101	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$16.90
Fedex P.O. Box 1140 Dept A. Memphis TN 38101	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$13.26
Fedex P.O. Box 1140 Dept A. Memphis TN 38101	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$13.26
Fedex P.O. Box 1140 Dept A. Memphis TN 38101	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$13.26
Fedex P.O. Box 1140 Dept A. Memphis TN 38101	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$13.26
Fruga Aquafarms P.O. Box 393 Branch LA 70516	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$74.95

SUBTOTAL of Disbursements This Page (optional)	\$181.69
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Operating Expenditures**

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NAME OF COMMITTEE (In Full) **Chris John For Congress Committee INC** **C00316696**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Gaidrys</b> 902 Harding St Lafayette LA 70503	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$55.00
<b>Giancona Container</b> 121 Industrial New Orleans LA 70121	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/23/2000	\$530.00
<b>Harris Crab House</b> Kent Narrows Way North Chester MD 21619	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/19/2000	\$272.20
<b>Hma</b> 1001 Thomas Jefferson NW #309 Washington, DC	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$28.00
<b>Jc Penney</b> Springfield Mall Springfield VA 22150	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$643.04
<b>John Distad Amoco</b> 823 Penn Ave SE Washington DC 20004	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$27.61
<b>John, Chris</b> P.O. Box 971 Crowley LA 70527	Reimb For Office Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$73.07
<b>Kaplan Advertising</b> P.O. Drawer 51500 Lafayette LA 70505	Campaign Consultant Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$9,380.00
<b>Kaplan Storage</b> N Cushing Ave Kaplan LA 70548	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/14/2000	\$60.00

SUBTOTAL of Disbursements This Page (optional) .....	\$11,068.92
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

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**Operating Expenditures**

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NAME OF COMMITTEE (In Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Kaplan Telephone Company, 118 N Irving Kaplan LA 70548	MEMO \$307.68 Reimb to Kim Turnley for phone Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/16/2000	\$0.00
B. Full Name, Mailing Address and ZIP Code KBON Radio 109 South 2nd ST. Eunice LA 70535	Purpose of Disbursement Radio Ads Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$150.00
C. Full Name, Mailing Address and ZIP Code Kelgley, Kourtney 220 E 3rd St. Crowley LA 70526	Purpose of Disbursement Payment For Campaign Work Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/7/2000	\$30.00
D. Full Name, Mailing Address and ZIP Code Kinko 2926 Johnston St Lafayette LA 70503	Purpose of Disbursement Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$102.13
E. Full Name, Mailing Address and ZIP Code Kmart 124 James Comeaux Rd Lafayette LA 70508	Purpose of Disbursement Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$23.53
F. Full Name, Mailing Address and ZIP Code La Dept Of Revenue P.O. Box 91017 Baton Rouge LA 70821	Purpose of Disbursement Taxes Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$122.00
G. Full Name, Mailing Address and ZIP Code Lejeune, Yolanda 20024 Buckhorn Drive Zachary, LA 70791	Purpose of Disbursement Payment For Campaign Work Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/8/2000	\$50.00
H. Full Name, Mailing Address and ZIP Code Lowas, Ambassador Caffery Pkwy Lafayette LA 70508	Purpose of Disbursement MEMO \$38.55 Reimb to Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00
I. Full Name, Mailing Address and ZIP Code Mahaffey, Mya 5292 E Whitney St. Crowley LA 70526	Purpose of Disbursement Payment For Campaign Work Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/7/2000	\$50.00

SUBTOTAL of Disbursements This Page (optional)

\$527.66

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

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**Operating Expenditures**

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NAME OF COMMITTEE (In Full)

**Chris John For Congress Committee INC**

**C00318598**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Mahaffey, Mya</b> 5292 E Whitney St. Crowley LA 70526	Payment For Campaign Work Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/7/2000	\$300.00
<b>Mickey Drive Inn</b> 706 E 1st Kaplan LA 70548	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$26.89
<b>Miller, Pat</b> Box 1349 Hwy 749 Opelousas LA 70570	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$500.00
<b>Moss, Melissa</b> 1909 Palarmo St. Sulphur LA 70863	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$520.00
<b>National Democratic Club</b> 30 Ivy Street SE Washington DC 20003	Dues Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$220.00
<b>Office Depot</b> 4670 Johnston Street Lafayette LA 70508	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$92.34
<b>Office Depot</b> 4670 Johnston Street Lafayette LA 70508	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$192.50
<b>Oges Rent All,</b> 129 Banks Ave. Lafayette LA 70506	MEMO \$45.15 Reimb to expenses Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00
<b>PalacIOUS, Paula</b> Treasurer's best effort Crowley LA 70527	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/19/2000	\$65.00

SUBTOTAL of Disbursements This Page (optional)

\$1,916.73

TOTAL This Period (last page this line number only)



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

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**Operating Expenditures**

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NAME OF COMMITTEE (In Full)

**Chris John For Congress Committee INC**

**C00316596**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Partisan Acadiana Mall Lafayette LA 70503	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$55.89
B. Full Name, Mailing Address and ZIP Code Park One, 601 Poydras St New Orleans LA 70130	Purpose of Disbursement MEMO \$42.00 Reimb to expense Chris John for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$0.00
C. Full Name, Mailing Address and ZIP Code Pats Tire And Lube Center, 101 Lynda Carenro LA 70520	Purpose of Disbursement MEMO \$32.15 Reimb to expense Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00
D. Full Name, Mailing Address and ZIP Code Pitney Bowes P.O. Box 7247 Philadelphia PA 19170	Purpose of Disbursement Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$26.42
E. Full Name, Mailing Address and ZIP Code Rayne Acadian-Tribune P.O. Box 260 Rayne LA 70578	Purpose of Disbursement Print Ads Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$144.00
F. Full Name, Mailing Address and ZIP Code Rice Palace Restaurant 110 W Exit 80 Crowley LA 70526	Purpose of Disbursement Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$30.53
G. Full Name, Mailing Address and ZIP Code Ruddocks, 556 SE Court Circle Crowley LA 70526	Purpose of Disbursement MEMO \$31.07 Reimb to expense Chris John for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$0.00
H. Full Name, Mailing Address and ZIP Code Safeway 3526 King St. Alexandria VA 22302	Purpose of Disbursement Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$157.09
I. Full Name, Mailing Address and ZIP Code Sams Wholesale Club 130 N Ambassador Pkwy Scott LA 70583	Purpose of Disbursement Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$237.15

SUBTOTAL of Disbursements This Page (optional)

\$651.09

TOTAL This Period (last page this line number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 10 OF 12  
FOR LINE NUMBER 17

**Operating Expenditures**

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>Sams Wholesale Club</b> 130 N Ambassador Pkwy Scott LA 70583	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/20/2000	\$128.80
<b>Shall 5174979088</b> Treasurer's best effort	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$15.00
<b>Shindiqz Decorations</b> One Party Place South Whitley, IN 46787	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$84.97
<b>Shreve, Angela</b> 3226 Stakes RD Crowley LA 70527	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/15/2000	\$250.00
<b>Stevenson, Tina</b> 6119 Southern Avenue Shreveport, LA 71106	Payment For Campaign Work Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/7/2000	\$50.00
<b>Texaco Inc. 44589280103</b> 11219 Hwy 35 Kaplan LA 70548	Travel Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$44.73
<b>The Caucus Room</b> Treasurer's best effort	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/30/2000	\$299.37
<b>The Rayne Independent</b> 201 E St Rayne LA 70578	Print Ads Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/1/2000	\$90.00
<b>The Rayne Independent</b> 201 E St Rayne LA 70578	Print Ads Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$22.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>\$984.87</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 11 OF 12

FOR LINE NUMBER 17

**Operating Expenditures**

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Todds Car Wash 5505 Johnston St. Lafayette LA 70503	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$13.45
B. Full Name, Mailing Address and ZIP Code Turnley, Kim 512 S Irving Kaplan LA 70548	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/10/2000	\$522.90
C. Full Name, Mailing Address and ZIP Code Turnley, Kim 512 S Irving Kaplan LA 70548	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$522.90
D. Full Name, Mailing Address and ZIP Code Turnley, Kim 512 S Irving Kaplan LA 70548	Reimb For Phone Usage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/16/2000	\$307.68
E. Full Name, Mailing Address and ZIP Code Turnley, Kim 512 S Irving Kaplan LA 70548	Reimb For Phone Usage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/22/2000	\$78.27
F. Full Name, Mailing Address and ZIP Code Turnley, Kim 512 S Irving Kaplan LA 70548	Campaign Workers' Salaries Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/22/2000	\$522.90
G. Full Name, Mailing Address and ZIP Code U S House Of Rep Gift Shop B 217 Longworth Building Washington DC 20515	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$90.00
H. Full Name, Mailing Address and ZIP Code U S Postal Service 118 W 3rd Street Kaplan LA 70548	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$330.00
I. Full Name, Mailing Address and ZIP Code Uhaul, 201 Rayburn Lafayette LA 70506	MEMO \$148.26 Reimb to Dale Dupuis for office expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/17/2000	\$0.00

SUBTOTAL of Disbursements This Page (optional)	\$2,388.10
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 12 OF 12

FOR LINE NUMBER

17

**Operating Expenditures**

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NAME OF COMMITTEE (In Full)

**Chris John For Congress Committee INC**

**C00216596**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
United States Postal Service Longworth HOB Suite B202 Washington DC 20515	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$6.40
United States Postal Service Longworth HOB Suite B202 Washington DC 20515	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$2.60
US Postal Service 3523 Ambassador Caffery Lafayette LA 70503	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$9.60
US Postal Service 3523 Ambassador Caffery Lafayette LA 70503	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$176.75
US Postal Service 123 East 3rd Crowley LA 70527	Postage Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$35.25
Wal Mart Veterans Memorial Dr. Abbeville LA 70510	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$15.29
Wanda Florist 1224 Cresswell Lane Opelousas LA 70570	Office Expenses Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$50.86
Williams Sonoma 1833 G International Dr. Alexandria VA 22302	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$135.85
Winn Dixie, 2004 North Parkerson Crowley LA 70526	MEMO \$2.13 Reimb to expense Dale Dupuis for office Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$0.00

SUBTOTAL of Disbursements This Page (optional)

\$440.60

TOTAL This Period (last page this line number only)

\$25,174.16

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 2  
FOR LINE NUMBER 21

**Other Disbursements**

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

NAME OF COMMITTEE (in Full)		C00316596	
<b>A. Full Name, Mailing Address and ZIP Code</b> Acadlan Sportsman League P.O. Box 921 Crowley LA 70527	<b>Purpose of Disbursement</b> nonfederal Contribution <u>Charitable</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 11/17/2000	<b>Amount of Each Disbursement this Period</b> \$25.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Bart Stupak 817 9th Ave Menominee MI 49858	<b>Purpose of Disbursement</b> Bart Stupak House 01 (MI) Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 10/19/2000	<b>Amount of Each Disbursement this Period</b> \$1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Blessed Katherine Drexel 1100 Mill St. Lake Charles LA 70601	<b>Purpose of Disbursement</b> nonfederal Contribution <u>Charitable</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 11/1/2000	<b>Amount of Each Disbursement this Period</b> \$50.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Clarence Waldrige Fund Treasurer's best effort	<b>Purpose of Disbursement</b> nonfederal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 11/15/2000	<b>Amount of Each Disbursement this Period</b> \$25.00
<b>E. Full Name, Mailing Address and ZIP Code</b> DCCC 430 South ST Washington DC 20003	<b>Purpose of Disbursement</b> federal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 10/19/2000	<b>Amount of Each Disbursement this Period</b> \$25,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Ken Bentson For Congress 5815 Morningside No. 301 Houston TX 77005	<b>Purpose of Disbursement</b> Ken Bentson House 25 (TX) Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 10/19/2000	<b>Amount of Each Disbursement this Period</b> \$1,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Lafayette Housing Authority 705 W University Lafayette LA 70503	<b>Purpose of Disbursement</b> nonfederal Contribution <u>Charitable</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 11/16/2000	<b>Amount of Each Disbursement this Period</b> \$40.00
<b>H. Full Name, Mailing Address and ZIP Code</b> Lake Charles Ducks Unlimited 6801 Wardline Rd Lake Charles LA 70601	<b>Purpose of Disbursement</b> nonfederal Contribution <u>Charitable</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 10/19/2000	<b>Amount of Each Disbursement this Period</b> \$200.00
<b>I. Full Name, Mailing Address and ZIP Code</b> Louisiana Democratic Party P.O. Box 4385 Baton Rouge LA 70821	<b>Purpose of Disbursement</b> federal Contribution Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Date (month, day, year)</b> 10/27/2000	<b>Amount of Each Disbursement this Period</b> \$50,000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$77,340.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 21

**Other Disbursements**

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lsue Booster Club Hwy 755 Eunice LA 70535	nonfederal Contribution <b>Charitable</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/31/2000	\$100.00
B. Full Name, Mailing Address and ZIP Code Ronnie Shows P.O. Box 2262 Jackson MS 39225	Purpose of Disbursement Ronnie Shows House 04 (MS) Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/19/2000	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Sam Gejdenson P.O. Box 1918 Bozrah CT 06334	Purpose of Disbursement Sam Gejdenson House 02 (CT) Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	10/27/2000	\$1,000.00
D. Full Name, Mailing Address and ZIP Code St. Cecilia School 302 W Main St. Broussard LA 70518	Purpose of Disbursement nonfederal Contribution <b>Charitable</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	11/1/2000	\$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	\$2,200.00
TOTAL This Period (last page this line number only)	\$79,540.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>12/7/00</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>RBN</i> PREPARER	<i>12/11/00</i> DATE PREPARED