

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

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FOR LINE NUMBER 21

**Other Disbursements**

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NAME OF COMMITTEE (In Full) **Chris John For Congress Committee INC** C00316396

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bill Strain For Us Congress P.O. Box 1297 Abita Springs LA 70420	Bill Strain House 02 (LA) Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/23/99	\$1,000.00
John Vallon Campaign Fund 1985 1-49 Service Rd S. Opelousas LA 70570	nonfederal Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/22/99	\$250.00
Weygang Committee 235 Promenade St. Warwick RI 02887	Robert Weygang House 02 (RI) Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	4/28/99	\$1,000.00
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)	\$2,250.00
TOTAL This Period (last page this line number only)	\$2,250.00