

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
C00316596 LA/07 120597 N
KENNETH DUGAS
AD CHRIS JOHN FOR CONGRESS COMMITTEE INC
P POST OFFICE BOX 971
ON CROWLEY LA 70527
C

FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 7 11 59 AM '98

2. FEC IDENTIFICATION NUMBER

C00316596

3. IS THIS REPORT AN AMENDMENT?

☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
☐ July 15 Quarterly Report ☐ 30-Day Post-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
☒ January 31 Year End Report ☐ Termination Report
☐ July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for ☒ 98 Primary Election ☒ 1996 DEPT RETIREMENT General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
07-01-97 through 12-31-97		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	120,017.41	250,982.41
(b) Total Contribution Refunds (from Line 20(d))	- 0 -	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	120,017.41	249,732.41
7. Net Operating Expenditures	33,380.11	85,823.30
(a) Total Operating Expenditures (from Line 17)		
(b) Total Offsets to Operating Expenditures (from Line 14)	412.02	1854.76
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	32,968.09	83968.54
8. Cash on Hand at Close of Reporting Period (from Line 27)	124,958.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	- 0 -	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	15,000.00	

For further information
contact:
Federal Election Commission
899 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-218-3420

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

Type or Print Name of Treasurer

KENNETH DUGAS

Signature of Treasurer



Date

1/30/98

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

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FEC40086

FEC FORM 3
(revised 4/87)

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: -7-01-97	To: 12-31-97
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		78531.75	
(ii) Unitemized		235.00	
(iii) Total of contributions from individuals		78766.75	137981.75
(b) Political Party Committees		- 0 -	2800.00
(c) Other Political Committees (such as PACs)		41250.66	110200.66
(d) The Candidate		- 0 -	- 0 -
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		120017.41	250982.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		- 0 -	- 0 -
13. LOANS:			
(a) Made or Guaranteed by the Candidate		- 0 -	2500.00
(b) All Other Loans		- 0 -	- 0 -
(c) TOTAL LOANS (add 13(a) and (b))		- 0 -	2500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		412.02	1854.76
15. OTHER RECEIPTS (Dividends, interest, etc.)		- 0 -	- 0 -
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		120429.43	255337.17
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		33380.11	85823.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		- 0 -	- 0 -
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		20000.00	45030.00
(b) Of All Other Loans		- 0 -	- 0 -
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		20000.00	45030.00
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		- 0 -	250.00
(b) Political Party Committees		- 0 -	- 0 -
(c) Other Political Committees (such as PACs)		- 0 -	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		- 0 -	1250.00
21. OTHER DISBURSEMENTS		1500.00	2600.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		54880.11	134703.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 59408.79	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$120429.43	24
25. SUBTOTAL (add Line 23 and Line 24)	\$179838.22	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 54880.11	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$124958.11	27

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 1 OF 16
FOR LINE NUMBER 11(a) (1)

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 HUGH D. ALDIGE 2201 VETERANS BLVD., SUITE 200 METAIRIE, LA 70002 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer SELF-EMPLOYED Occupation ATTORNEY Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code CLAY ALLEN P.O. BOX 5321 LAFAYETTE, LA 70502 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer ALLEN & GOODCH Occupation ATTORNEY Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code WILLIAM ARCENEAUX 700 N. 10TH STREET SUITE 210 BATON ROUGE, LA 70602 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer LHICU Occupation EDUCATOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 7-22-97	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code BILL ASHY P.O. BOX 51657 LAFAYETTE, LA 70505 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer SELF-EMPLOYED Occupation SENIOR V.P. Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-31-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code GLEN ASHY P.O. BOX 51851 LAFAYETTE, LA 70505 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer C.F. BEAN CORP. Occupation V.P.-SALES Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-31-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code DAVID AYWARD 5913 32ND STREET, N.W. WASHINGTON, DC 20015 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer NATIONAL STRATEGIES INC Occupation PRESIDENT Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 11-5-97	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code ERRGL BABINEAUX P.O. BOX 98000 LAFAYETTE, LA 70509 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer ACADIAN AMBULANCE SERVICE, INC. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
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Use separate schedule(s)
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PAGE 2 OF 16
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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code GEORGE BAKER 5012 SCARSDALE RD. BETHESDA, MS 20816 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer WILLIAM & JENSEN Occupation ATTORNEY Aggregate Year-to-Date > \$ 231.75	Date (month, day, year) 10-30-97 10-30-97	Amount of Each Receipt this Period 186.75 IN-KIND 45.00 IN-KIND (FUNDRAISING CATERING & CLEAN UP)
B. Full Name, Mailing Address and ZIP Code LYN BANKSTON P.O. BOX 985 WINNFIELD, LA 71483 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF Occupation NURSING FACILITY OPER. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 8-15-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code CARL J. BARBIER 858 CAMP STREET NEW ORELEANS, LA 70130 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code STEVE BARRY 300 N. MAIN STREET CHURCH POINT, LA 70525 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CHURCH POINT PHARMACY Occupation OWNER-PHARMACIST Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 9-24-97	Amount of Each Receipt this Period 400.00
E. Full Name, Mailing Address and ZIP Code ROBERT BELK 8440 JEFFERSON HWY. BATON ROUGE, LA 70809 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer OCEAN ENERGY Occupation EXEC.VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-13-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code GLENN BERGERON 5328 CRAIG AVE KENNER, LA 70065 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code PATRICK BOSSETTA 2240 PETERS RD. HARVEY, LA 70058 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

2881.75

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11(a) (1)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code LOSTON BOURQUE JR. P.O. BOX 52164 LAFAYETTE, LA 70502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF EMPLOYED Occupation BUSINESSMAN Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code JACK PIERCE BROOK 400 PYDRAS ST. SUITE 2500 NEW ORLEANS, LA 70130 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code N.R. BROUSSARD 25817 LA HWY 333 ABBEVILLE, LA 70510 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer BROUSSARD BROTHERS INC. Occupation CHAIRMAN OF THE BOARD Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code TONI BROUSSARD 1711 JACQULYN ABBEVILLE, LA 70510 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NONE Occupation HOUSEWIFE Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code KENNETH L. BROWN 1674-3 SONIAT ST. NEW ORELEANS, LA 70115 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code BRUCE BURGLASS 3850 N. CAUSEWAY BLVD. METARIE, LA 70002 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer BURGLASS & ASSOC. Occupation SOLE-PROPRIETOR Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code NELSON J. CANTHELLE JR. 300 HUEY P. LONG AVE. SUITE G GRETN, LA 70053 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code ALBERT CHAO 3994 INERVESS HOUSTON, TX 77019 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer WESTLAKE GROUP Occupation PRESIDENT Aggregate Year-to-Date > \$2000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code ROLAND VAUGHN CIMINI 4026 BARONNE ST. NEW ORLEANS, LA 70115 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer CIMINI & ASSOC. Occupation ATTORNEY Aggregate Year-to-Date > \$750.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 750.00
C. Full Name, Mailing Address and ZIP Code CLIFFORD E. CLAYTON JR. 3816 PECAN DRIVE CHALMETTE, LA 70043 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code GLENN E. COMEAUX 119 WESTFIELD DRIVE LAFAYETTE, LA 70503-5485 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ACADIAN AMBULANCE SERVICE Occupation SR. VICE PRESIDENT Aggregate Year-to-Date > \$1500.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code LYLE CRAIN P.O. BOX 118 GRAND CHENIER, LA 70643 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CRAIN BROTHERS, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 11-7-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code MICHAEL CRATON 210 SADDLEWOOD CORNER LAFAYETTE, LA 70508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF Occupation Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code DAVID CRAYS 2314 KALISTE SALOOM RD. APT. 1806 LAFAYETTE, LA 70508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer OMNI Occupation VICE PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

6,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
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FOR LINE NUMBER
11(a) (i)

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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code JOSEPH CULOTTA 111 CRAFTSMAN RD. CARENCRO, LA 70558 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CULOTTA'S INC. Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code MAGARET G. D'HEMECOURT 321 RUE ST. PETER METARIE, LA 70005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SCHOOL BOARD Occupation SCHOOL TEACHER Aggregate Year-to-Date > \$500.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code KENNETH DEPELICE P.O. BOX 120 CADE, LA 70519 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer GULF COAST Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code DANIEL J. DOMINGUE 105 LLANSFAIR DRIVE LAFAYETTE, LA 70503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ACADIAN AMBULANCE SERVICE Occupation EXECUTIVE V.P. Aggregate Year-to-Date > \$1500.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code WALKER H. DRAKE JR. P.O. BOX 1519 CHALMETTE, LA 70044 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code ROLAND DUGAS JR. 400 OAKLEAF DRIVE LAFAYETTE, LA 70503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ACADIAN AMBULANCE SERVICE Occupation CHAIRMAN OF THE BOARD Aggregate Year-to-Date > \$1500.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code JOHN EGLE P.O. BOX 82406 LAFAYETTE, LA 70598 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CAJUN COUNTRY AUTOPLEX Occupation OWNER Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

6,500.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code W.H. FENSTEMAKER 135 REGENCY SQ. LAFAYETTE, LA 70508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer C.B. FENSTEMAKER Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code RON FISHER P.O. BOX 38 BRCUSSARD, LA 70518 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MARIAH CORP. Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code JOHN FLORES P.O. BOX 51213 LAFAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer OCEAN ENERGY Occupation VICE PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-31-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code ERNESTINE GEORGE 222 GRAND AVE. LAFAYETTE, LA 70504 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SIDEWINDER PUMPS, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code MARTIN GOULD 1853 CAROL SUE GREYNA, LA 70054 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code RICHARD GREER P.O. BOX 30100 SHREVEPORT, LA 71130-0100 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HEALTH CARE CAPITAL, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$500.00	Date (month, day, year) 8-15-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code BILLY HAGAN P.O. BOX 53848 LAFAYETTE, LA 70505 Receipt For: ☐ Primary ☐ General ☒ Other (specify): CHAIRMAN	Name of Employer STRATAGRAPH, INC. Occupation CHAIRMAN Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11-26-97	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

5,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code RANDY HAYNIE P.O. BOX 52129 LAFAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF-EMPLOYED Occupation CONSTRUCTION Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-18-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code KEITH HEARD 1301 PENNSYLVANIA AVE. N.W. WASHINGTON, DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer KEITH HEARD ASSOCIATES Occupation PRESIDENT Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11-3-97	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code TIMOTHY HEBERT 326 SOUTH MAIN ST. BREAUX BRIDGE, LA 70517 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer HUTCO INC. Occupation EXECUTIVE VICE PRES. Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code MAX HOYT 603 ROBERT LEE CIRCLE LAFAYETTE, LA 70506 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PIXUS DIGITALPRINTING Occupation PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code CHARLES KILGORE 201 WHITCOMB LAFAYETTE, LA 70503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer KILGORE OFFSHORE INC. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-7-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code SCOTT LABARRE 7400 ONYX STREET NEW ORLEANS, LA 70124 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer GAUTHIER, DOWNING, LABARRE Occupation ATTORNEY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code EDWARD LABORDE P.O. BOX 61 ABBEVILLE, LA 70510 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer TRUSSCO INC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

5,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

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

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FOR LINE NUMBER
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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 ROX LATIOLAIS 112 RUE CHAVNIAC LAFAYETTE, LA 70508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SOLOGO, LLC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code MICHAEL W. LEBLANC 15755 ANTIETAM AVE. BATON ROUGE, LA 70817 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF EMPLOYED Occupation ARCHITECT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 9-24-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code JOSEPH J. LEPOW 3900 VETERANS MEMORIAL BLVD. SUITE 20 METairie, LA 70002 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF EMPLOYED Occupation ATTORNEY Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-10-97	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code JAMES R. LEWIS 3988 S. RAMSEY DRIVE BATON ROUGE, LA 70808 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer CRAWFORD & LEWIS Occupation ATTORNEY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 9-24-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code CHARLES MADER 3909 W. CONGRESS LAFAYETTE, LA 70506 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MADER-MIERS ENGINEERING Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code GEORGE MANNINA 4101 MONTEPELIER RD. ROCKVILLE, MD 20853 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer O'CONNOR & HANNAH L.L.P. Occupation ATTORNEY Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-10-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code MILDRED MCELLIGOTT P.O. BOX 2579 LAFAYETTE, LA 70502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MACRO OIL Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

4,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code ROBERT P. MCPARLAND 7422 HURST STREET NEW ORLEANS, LA 70118 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and ZIP Code CHRIS MONCLA 816 CURTIS ST. LAFAYETTE, LA 70506 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MONCLA WELL SERVICE Occupation GILFIELD Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code DAVID MONCLA 435 BRENTWOOD BLVD. LAFAYETTE, LA 70506 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MONCLA WELL SERVICE Occupation SALES Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code MATTHEW MONCLA P.O. BOX 53746 LAFAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MONCLA WELL SERVICE Occupation SALES Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code MIKE MONCLA 435 BRENTWOOD BLVD. LAFAYETTE, LA 70506 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer MONCLA WELL SERVICE Occupation SALES MANAGER Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code CHARLIE MONCLA JR. P.O. BOX 53746 LAFAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MONCLA WELL SERVICE Occupation PRESIDENT/OWNER Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code LEON MONCLA SR. P.O. BOX 53148 LAFAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MONCLA INSURANCE Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

6,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code ROBERT MUTH 180 MAIDEN LAKE NEW YORK, NY 10039 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ASARCO INC. Occupation NOT AVAILABLE Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-10-97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code MARK PHILLIPS P.O. BOX 52164 LAPAYETTE, LA 70505 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SUPREME CONTRACTORS, INC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code TESSIE PIERCE 501 E MAGNOLIA ABBEVILLE, LA 70510 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NONE Occupation HOUSEWIFE Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code TEDDY R. PRICE P.O. BOX 1438 WINNFIELD, LA 71483 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer CENTRAL MANAGEMENT CO. Occupation NURSING HOME MANAGER Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 8-15-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code PHILLOP W. REBOWE 416 TIMBERLANE DRIVE GRETN, LA 70056 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer REBOWE & COMPANY Occupation CPA Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code FRANK RELAN 2401 BRISTOL PL. NEW ORLEANS, LA 70131 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer SELF EMPLOYED Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 12-31-97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code BOBBY RHYNE 307 SAWGRASS LANE BROUSSARD, LA 70502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer PREHEAT Occupation SALES Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

3,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code ROBERT S. ROTOLO 326 SHELBY DRIVE BATON ROUGE, LA 70815	Name of Employer SELF EMPLOYED Occupation GENERAL CONTRACTOR	Date (month, day, year) 8-15-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$1000.00		
B. Full Name, Mailing Address and ZIP Code JAMES ROY P.O. BOX 3668 LAFAYETTE, LA 70508	Name of Employer SELF EMPLOYED Occupation ATTORNEY	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$1000.00		
C. Full Name, Mailing Address and ZIP Code WILLIAM RUCKS IV 120 SHANNON ROAD LAFAYETTE, LA 70503	Name of Employer FLORES & RUCKS Occupation CO-OWNER	Date (month, day, year) 11-7-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1000.00		
D. Full Name, Mailing Address and ZIP Code GREG SARVER 265 J.B. SARVER RD. CROWLEY, LA 70526	Name of Employer AMELIA MANOR, INC. Occupation NURSING FACILITY OPER.	Date (month, day, year) 8-15-97	Amount of Each Receipt this Period 500.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$500.00		
E. Full Name, Mailing Address and ZIP Code ROBERT A. SAVOIE 311 MAGNOLIA DRIVE METAIRIE, LA 70005	Name of Employer SCIENCE & ENGINEERING Occupation VICE-CHAIRMAN	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$500.00		
F. Full Name, Mailing Address and ZIP Code HERBERT SCHILLING II P.O. BOX 2279 LAFAYETTE, LA 70501	Name of Employer SCHILLING DISRIBUTINGCO Occupation PRESIDENT	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1000.00		
G. Full Name, Mailing Address and ZIP Code EUGENE SELLERS 148 B. EASY ST. LAFAYETTE, LA 70506	Name of Employer SELLERS & ASSOCIATES INC. Occupation	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1000.00		

SUBTOTAL of Receipts This Page (optional)

6,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code GLENN D. SMITH 148 DEVON LAPLACE, LA 70068 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer MAGNOLIA HOLDINGS INC. Occupation PRESIDENT Aggregate Year-to-Date > \$500.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code LINDA STURLESE 6389 GRAND CHENIER HWY GRAND CHENIER, LA 70643 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NONE Occupation HOUSEWIFE Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00 REATTRIBUTED FROM RICHARD STURLESE
C. Full Name, Mailing Address and ZIP Code RICHARD STURLESE P.O. BOX 98000 LAFAYETTE, LA 70509-8000 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ACADIAN AMBULANCE SER. Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period (1000.00) REATTRIBUTED TO LINDA STURLESE
D. Full Name, Mailing Address and ZIP Code DAVID TADLOCK P.O. BOX 16990 LAKE CHARLES 70616-6990 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code DR. JOHN TASSIN P.O. BOX 368 VILLE PLATTE, LA 70586 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF EMPLOYED Occupation MEDICAL DOCTOR Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code LOUIS TAUZIN 3505 JOHNSTON ST. LAFAYETTE, LA 70503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer LOUIE'S CAR WASH Occupation OWNER Aggregate Year-to-Date > \$400.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 400.00
G. Full Name, Mailing Address and ZIP Code BRAD G. THEARD 131 AIRLINE HWY SUITE 201 METAIRIE, LA 70001 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEPT RETIREMENT	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

3,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code CHARLES TRENT 306 KEENEY AVE LAFAYETTE, LA 70501 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer LANDRY, HARRIS & CO. Occupation AGENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code ADRIAN VEGA 4054 DOYLE DRIVE LAFAYETTE, LA 70508 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer ACADIANA DODGE, INC. Occupation PRESIDENT/DEALER Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-2-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code JEROME M. VOLK JR. 3329 FLORIDA AVE KENNER, LA 70065 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation ATTORNEY Aggregate Year-to-Date > \$250.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code JOHN WHITING 521 E. THIRD ST. CROWLEY, LA 70526 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer WHITING & ASSOCIATES Occupation PRESIDENT Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code BOB WRIGHT P.O. BOX 3668 LAFAYETTE, LA 70502 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer SELF Occupation ATTORNEY Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code GREGORY YOUNG 11212 LAZY LAKE RD BATON ROUGE, LA 70818 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 12-31-97	Amount of Each Receipt this Period 1000.00
G. Full Name, Mailing Address and ZIP Code RICHARD KERNICK JR. 132 SHANNON RD. LAFAYETTE, LA 70503 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer OCEAN ENERGY INC. Occupation EXECUTIVE VICE PRES. Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

6,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

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

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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
JOHN R. ZUSHLAG P.O. BOX 98000 LAFAYETTE, LA 70509	ACADIAN AMBULANCE SERVICE Occupation SR. VICE PRESIDENT	10-21-97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1500.00		
RICHARD E. ZUSHLAG 108 ASTORIA LOOP LAFAYETTE, LA 70508	ACADIAN AMBULANCE SERVICE Occupation PRESIDENT	10-21-97	1000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1500.00		
K.G. PROPERTIES P.O. BOX 52389 SHREVEPORT, LA 70135	PARTNERSHIP Occupation	11-26-97	500.00 (SEE ATTRIBUTION BELOW)
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$ 500.00		
DAVID GAMBLE JR. P.O. BOX 52389 SHREVEPORT, LA 70135	K.G. PROPERTIES Occupation	11-26-97	167.00 MEMO
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$167.00		
KEVIN GAMBLE P.O. BOX 52389 SHREVEPORT, LA 70135	K.G. PROPERTIES Occupation	11-26-97	167.00 MEMO
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$167.00		
KEITH GAMBLE P.O. BOX 52389 SHREVEPORT, LA 70135	K.G. PROPERTIES Occupation	11-26-97	166.00 MEMO
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Aggregate Year-to-Date > \$166.00		
MORROW, MORROW, RYAN & BASSET P.O. DRAWER 750 OPELOUSAS, LA 70571	PARTNERSHIP Occupation	10-21-97	1000.00 (SEE ATTRIBUTION BELOW)
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$1000.00		

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS

 CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
 POLITICAL COMMITTEES

 Use separate schedule(s)
 for each category of the
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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code JEFFERY M. BASSETT P.O. DRAWER 750 OPELOUSAS, LA 70571	Name of Employer MORROW, MORROW, RYAN & BASSETT Occupation ATTORNEY Aggregate Year-to-Date > \$ 333.33	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 333.33 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code PATRICK MORROW P.O. DRAWER 750 OPELOUSAS, LA 70571	Name of Employer MORROW, MORROW, RYAN & BASSETT Occupation ATTORNEY Aggregate Year-to-Date > \$ 333.34	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 333.34 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code JAMES P. RYAN P.O. DRAWER 750 OPELOUSAS, LA 70571	Name of Employer MORROW, MORROW, RYAN & BASSETT Occupation ATTORNEY Aggregate Year-to-Date > \$ 333.33	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 333.33 MEMO
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code COMMODORE THOMAS J. LUPO 145 ROBERT E. LEE BLVD. PENTHOUSE STE. NEW ORLEANS, LA 70124	Name of Employer COMMODORE THOMAS J. LUPO ENTERPRISES Occupation SOLE-PROPRIETOR Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 9-10-97	Amount of Each Receipt this Period 250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code JOYCE GOLDEP 3725 RUE EMILION METAIRIE, LA 70002	Name of Employer NOT AVAILABLE Occupation NOT AVAILABLE Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 9-2-97	Amount of Each Receipt this Period 500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code GEORGE LOCKHART 33830 CYPRESS BLUFF DENHAM SPRINGS, LA 70726	Name of Employer NOT AVAILABLE Occupation NOT AVAILABLE Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT			
G. Full Name, Mailing Address and ZIP Code JAY PARRIE 33801 S. SEAS DENHAM SPRINGS, LA 70726	Name of Employer NOT AVAILABLE Occupation NOT AVAILABLE Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT			

SUBTOTAL of Receipts This Page (optional)

2,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A
CONTRIBUTIONS FROM INDIVIDUALS/PERSONS OTHER THAN
POLITICAL COMMITTEES

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
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NAME OF COMMITTEE (in full)
CHRIS JOHN FOR CONGRESS COMMITTEE INC.

C00316596

A. Full Name, Mailing Address and ZIP Code DON WILLIAMS 903 E. MAIN ST. NEW ROADS, LA 70760 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer SELF-EMPLOYED Occupation FARMER Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code FRANCIS FREEMAN 1030 BAYOU BLUE BY-PASS THIBODAUX, LA 70301 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
C. Full Name, Mailing Address and ZIP Code JEFF DAVID P.O. BOX 1529 DENHAM SPRINGS, LA 70727 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code MARTY CHABERT 700 N. 10TH SUITE 240 BATON ROUGE, LA 70802 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NOT AVAILABLE Occupation Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
E. Full Name, Mailing Address and ZIP Code MRS. CLAUDE PENN JR. 35059 BEND RD. DENHAM SPRINGS, LA 70726 Receipt For: ☐ Primary ☐ General ☒ Other (specify): 96 DEBT RETIREMENT	Name of Employer NONE Occupation HOUSEWIFE Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 1000.00
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

70,531.75

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

Use separate schedule(s)
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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code

ACTION COMMITTEE FOR RURAL
ELECTRIFICATION
4301 WILSON BLVD.
ARLINGTON, VA 22203-1860

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

Name of Employer

Date (month,
day, year)

10-21-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 1600.00

B. Full Name, Mailing Address and ZIP Code

AGC PAC
1957 E. ST., N.W.
WASHINGTON, DC 20006

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

Name of Employer

Date (month,
day, year)

9-24-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 500.00

C. Full Name, Mailing Address and ZIP Code

ALABAMA FARMERS FEDERATION PAC
P.O. BOX 11023
MONTGOMERY, AL 36191

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

Name of Employer

Date (month,
day, year)

10-21-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code

AMERICAN CRYSTAL SUGAR PAC
101 NORTH THIRD ST.
MOOREHEAD, MD 56560

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

Name of Employer

Date (month,
day, year)

11-5-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$1000.00

E. Full Name, Mailing Address and ZIP Code

AMERICAN SUGAR CANE LEAGUE PAC
P.O. DRAWER 938
THIBODAUX, LA 70302

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

Name of Employer

Date (month,
day, year)

11-3-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 1000.00

F. Full Name, Mailing Address and ZIP Code

AMOCU PAC
200 EAST RANDOLPH DRIVE MAIL CODE 374013
CHICAGO, IL 60601

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

Name of Employer

Date (month,
day, year)

11-18-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code

ANADARKO PETROLEUM CORPORATION PAC
P.O. BOX 1330
HOUSTON, TX 77251-1330

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

Name of Employer

Date (month,
day, year)

10-28-97

Amount of Each
Receipt this Period

500.00

Occupation

Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS
CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

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FOR LINE NUMBER 11 (C)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code ARCHER DANIEL MIDLAND PAC P.O. BOX 1470 DECATUR, IL 62525	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	11-10-97	1000.00
Aggregate Year-to-Date > \$ 1000.00			
B. Full Name, Mailing Address and ZIP Code ARCO PAC 515 S. FLOWERS ST. #4087 LOS ANGELES, CA 90071	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	12-29-97	500.00
Aggregate Year-to-Date > \$ 500.00			
C. Full Name, Mailing Address and ZIP Code BELLSOUTH TELECOMMUNICATIONS FEDERAL 675 W. PEACHTREE ST., NE, ROOM 36M66 ATLANTA, GA 30375	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	10-21-97	1000.00
Aggregate Year-to-Date > \$ 2000.00			
D. Full Name, Mailing Address and ZIP Code BETTER GOVERNMENT FUND OF McDERMOTT 1525 WILSON BLVD., SUITE 100 ARLINGTON, VA 22209	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	7-15-97	500.00
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code BPA-PAC 1776 I. ST., N.W., SUITE 1000 WASHINGTON, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	10-28-97	500.00
Aggregate Year-to-Date > \$ 500.00			
F. Full Name, Mailing Address and ZIP Code BROWNBUILDERS PAC P.O. BOX 3 HOUSTON, TX 77001-0003	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	10-28-97	500.00
Aggregate Year-to-Date > \$ 500.00			
G. Full Name, Mailing Address and ZIP Code BUILD PAC OF THE NATIONAL ASSOC. OF HOME BUILDERS 201 15TH ST. N.W. WASHINGTON, DC 20005-2800	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	12-17-97	1000.00
Aggregate Year-to-Date > \$ 3000.00			

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

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NAME OF COMMITTEE (or Fund)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code

CAROLINA POWER & LIGHT PAC
P.O. BOX 1510
RALEIGH, NC 27602-1510

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

10-28-97

500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code

CHEVRON EMPLOYEES PAC
527 MARKET ST. ROOM 908
SAN FRANCISCO, CA 94105

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-5-97

500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

C. Full Name, Mailing Address and ZIP Code

CHUBBPAC
P.O. BOX 1615
WARREN, NJ 07061-1615

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

7-8-97

500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

D. Full Name, Mailing Address and ZIP Code

COASTAL EMPLOYEE PAC
NINE GREENWAY PLAZA
HOUSTON, TX 77046

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-10-97

500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 500.00

E. Full Name, Mailing Address and ZIP Code

CCCA-COLA ENTERPRISES INC. EMPLOYEES
NONPARTISAN FOR GOOD GOVERNMENT
P.O. BOX 723040
ATLANTA, GA 31139-0040

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

8-13-97

500.00

Occupation

Receipt For:

☐ Primary

☐ General

☒ Other (specify):

DEBT RETIREMENT

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code

COLUMBIA GAS EMPLOYEE PAC
12355 SUNRISE VALLERY DRIVE
RESTON, VA 20191

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

12-3-97

1000.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 2500.00

G. Full Name, Mailing Address and ZIP Code

COMMITTEE FOR ADVANCEMENT OF COTTON
P.O. BOX 12292
MEMPHIS, TN 38182

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt This Period

11-20-97

500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 1000.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A
ITEMIZED RECEIPTS

 Use separate schedule(s)
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Detailed Summary Page

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 FOR LINE NUMBER
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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 CONDEA VISTA EFFECTIVE GOVERNMENT FUND 900 THREADNEEDLE HOUSTON, TX 77079 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 7-22-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code CONSOLIDATED NATURAL GAS SERVICE CO. INC. EXECUTIVE POLITICAL FUND P.O. BOX 2545 PITTSBURGH, PA 15230-2545 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-26-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code CONSUMERS POWER CO. EMPLOYEES FOR BETTER GOV'T FEDERAL 212 W. MICHIGAN AVE. JACKSON, MI 49201 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-13-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code CSWC PAC P.O. BOX 660164 DALLAS, TX 75266-0164 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-20-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code EDPAC 2000 SECOND AVE. DETROIT, MICHIGAN Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-5-97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code EL PASO ENERGY CORP PAC 601 13TH ST., N.W., STE. 850 SOUTH WASHINGTON, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-9-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code EMPLOYEES OF ENTERGY OPERATIONS, INC. PAC P.O. BOX 31995 JACKSON, MS 39206-1995 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-2-97	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

COD316596

A. Full Name, Mailing Address and ZIP Code
EMPLOYEES OF NORTHROP GRUMMAN CORP. PAC
1234 6TH ST. #204
SANTA MONICA, CA 90401

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

7-22-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code
EXXON PAC
P.O. BOX 2180
HOUSTON, TX 77252-2180

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

11-4-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

C. Full Name, Mailing Address and ZIP Code
FIREMAN'S FUND INSURANCE COMPANY EMP.
COMM. FOR RESP. GOVERNMENT
1101 CONNECTICUT AVE., NW SUITE 950
WASHINGTON, DC 20036

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

7-8-97

250.00

Occupation

Receipt For: ☒ Primary ☐ General
☒ Other (specify): DEPT. RETIREMENT

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code
FOOD MARKETING INSTITUTE PAC
800 CONNECTICUT AVE., NW SUITE 500
WASHINGTON, DC 20006-2701

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

11-3-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

E. Full Name, Mailing Address and ZIP Code
FREEPORT-MCMURAN, INC CITIZENSHIP COMM.
30 F. ST.
WASHINGTON, DC 20001

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

10-21-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code
GENERAL PACIFIC EMPLOYEES FUND
1875 EYE ST., N.W. SUITE 775
WASHINGTON, DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

11-5-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code
GENERAL ELECTRIC PAC
1299 PENNSYLVANIA AVE. N.W. SUITE 1100
WASHINGTON, DC 20006

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

11-5-97

500.00

Occupation

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

Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

3,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

Use separate schedule(s)
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NAME OF COMMITTEE (in full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code HARRY LEE, SHERIFF RE-ELECTION FUND P.O. BOX 188 GRETN, LA 70054-0188 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 9-5-97	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code IMC GLOBAL OPERATIONS PAC 2100 SANDERS ROAD PKY. NORTHBROOK, IL 60062 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code INTERNATIONAL COUNCIL ON SHOPPING CENTERS 1033 ALEXANDRIA, VA 22314-1540 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 8-13-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code IPAA WILDCATTER PAC FUND 1101 16TH ST. NW WASHINGTON, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$1000.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code KERR-MCGEE PAC 1667 K ST. N.W. SUITE 250 WASHINGTON, DC 20006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-13-97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code LOUISIANA LAND & EXPLORATION CO. PAC P.O. BOX 60350 NEW ORLEANS, LA 70160 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code LUMBER DEALERS PAC 40 IVY ST. S.E. WASHINGTON, DC 20003 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 9-17-97	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code MAPCO PAC 1800 S. BALTIMORE AVE. TULSA, OK 74119 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code MARATHON OIL CO. EMPLOYEES PAC 539 SOUTH MAIN ST. FINDLAY, OH 45840 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code MID-CONTINENT OIL & GAS 801 PENNSYLVANIA AVE., N.W. STE. 840 WASHINGTON, DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code MIDCON CORP. PAC 701 EAST 22ND ST. ROOM 190 LOMBARD, ILL. 60148 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-3-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code MINN-DAK FARMERS COOPERATIVE 7525 RED RIVER ROAD WAKPETON, ND 58075 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-18-97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code NATIONAL ASSOCIATION OF LETTER CARRIERS PAC 100 INDIANA AVE. N.W. WASHINGTON, DC 20001 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code NATIONAL ASSOCIATION OF CONVENIENCE STORES 1605 KING ST. ALEXANDRIA, VA 22314-2792 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-3-97	Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A **ITEMIZED RECEIPTS**
CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

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FOR LINE NUMBER
11 (C)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code

NFIB SAFE TRUST
600 MARYLAND AVE. SW. STE. 700
WASHINGTON, DC 20024

Name of Employer

Date (month,
day, year)

8-27-97
11-20-97

**Amount of Each
Receipt this Period**

500.00
2000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 2500.00

B. Full Name, Mailing Address and ZIP Code

OIL, CHEMICAL, & ATOMIC WORKERS COPE,
VOLUNTARY FUND
711 W. BAY AREA BLVD., #512
WEBSTER, TX 77598

Name of Employer

Date (month,
day, year)

9-24-97

**Amount of Each
Receipt this Period**

500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

C. Full Name, Mailing Address and ZIP Code

PECO PAC
2301 MARKET ST. S-13-1
PHILADELPHIA, PA

Name of Employer

Date (month,
day, year)

12-30-97

**Amount of Each
Receipt this Period**

500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

D. Full Name, Mailing Address and ZIP Code

PHILLIPS PETROLEUM PAC
1776 EYE ST. N.W.
WASHINGTON, DC 20006

Name of Employer

Date (month,
day, year)

11-5-97

**Amount of Each
Receipt this Period**

500.66

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$500.66

E. Full Name, Mailing Address and ZIP Code

POWER PAC
701 PENNSYLVANIA AVE. N.W.
WASHINGTON, DC 20004

Name of Employer

Date (month,
day, year)

11-5-97
12-30-97

**Amount of Each
Receipt this Period**

500.00
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000.00

F. Full Name, Mailing Address and ZIP Code

REPAC
1819 ST., N.W., 7TH FLOOR
WASHINGTON, DC 20036

Name of Employer

Date (month,
day, year)

7-5-97
12-30-97

**Amount of Each
Receipt this Period**

250.00
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code

S.E.E.P.A.C.
P.O. BOX 968
SAVANNAH, GA 31402

Name of Employer

Date (month,
day, year)

12-17-97

**Amount of Each
Receipt this Period**

500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

6,000.66

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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

PAGE 9 OF 10

FOR LINE NUMBER
11 (C)

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code SEPAC P.O. BOX 2846 HOUSTON, TX 77252 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-30-97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code SONAT PAC P.O. BOX 2563 BIRMINGHAM, AL 35202-2563 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 11-18-97	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code SOUTHERN MINNESOTA SUGAR COOPERATIVE PAC P.O. BOX 500 RENVILLE, MN 56284 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-10-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code TEXACO POLITICAL INVOLVEMENT COMMITTEE 1050 17 TH ST. N.W. SUITE 500 WASHINGTON, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-3-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code THE WALT DISNEY COMPANY EMPLOYEES PAC 500 BUENA VISTA BURBANK, CA 91521 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-28-97	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code UNION PACIFIC RESOURCES PAC 555 THIRTEENTH ST. N.W. SUITE 450 W. WASHINGTON, DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1500.00	Date (month, day, year) 7-8-97 11-3-97	Amount of Each Receipt this Period 1000.00 500.00
G. Full Name, Mailing Address and ZIP Code UNITED EGG ASSOCIATION PAC 1303 HIGHTOWER TRAIL SUITE 300 ATLANTA, GA 30350 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-26-97	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,500.00

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

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 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 VAN NESS FELDMAN PAC 1050 THOMAS JEFFERSON ST., N.W. WASHINGTON, DC 20007 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1250.00	Date (month, day, year) 10-21-97	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code VIRGINIA CAROLINA'S PEANUT PAC 412 FIRST ST. S.E. SUITE 40 WASHINGTON, DC 20003 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 11-3-97	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code WILLIAM & JENSEN PAC 1155 21st STREET, N.W. SUITE 300 WASHINGTON, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 11-26-97	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code NATIONAL CATTLEMAN'S BEEF ASSOCIATION P.O. BOX 3469 GREENWOOD VILLAGE, CO 80155 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 12-30-97	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code NATIONAL TELEPHONE COOPERATIVE ASSOC. 2626 PENNSYLVANIA AVE., N.W. WASHINGTON, DC 20037 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code EFC FEDPAC 10 LAFAYETTE SQ. BUFFALO, NY 14203 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-8-97	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

2,500.00

TOTAL This Period (last page this line number only)

41,250.66

SCHEDULE A

ITEMIZED RECEIPTS

OFFSETS TO OPERATING EXPENDITURES

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

PAGE 1 OF 1
FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code CHRIS JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer (REFUND OF TRAVEL EXPENSE REIMBURSED PERSONALLY) Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 12/30/97	Amount of Each Receipt this Period 406.00
B. Full Name, Mailing Address and ZIP Code UNITEMIZED OFFSETS TO OPERATING EXPENDITURES Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period 6.02
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

412.02

TOTAL This Period (last page this line number only)

412.02

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
N/A

EXEMPT LEGAL & ACCOUNTING SERVICES

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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
STEPHANIE TRAHAN P.O. DRAWER 750 CROWLEY, LA 70527-0307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BROUSSARD, POCHE' LEWIS & BREAUX Occupation CPA	7-1-97 THROUGH 12-31-97	2,001.75 MEMO
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TROY BREAUX P.O. DRAWER 307 CROWLEY, LA 70527-0307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BROUSSARD, POCHE' LEWIS & BREAUX Occupation CPA	7-1-97 THROUGH 12-31-97	542.74 MEMO
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROCHELLE GUILLORY P.O. DRAWER 307 CROWLEY, LA 70527-0307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BROUSSARD, POCHE' LEWIS & BREAUX Occupation TYPIST	7-1-97 THROUGH 12-31-97	507.50 MEMO
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STELLA DUNON P.O. DRAWER 307 CROWLEY, LA 70527-0307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BROUSSARD, POCHE' LEWIS & BREAUX Occupation	7-1-97 THROUGH 12-31-97	260.00 MEMO
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DARLENE VILLEJOIN P.O. DRAWER 307 CROWLEY, LA 70527-0307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	BROUSSARD, POCHE' LEWIS & BREAUX Occupation CLERICAL	7-1-97 THROUGH 12-31-97	15.56 MEMO
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

3,327.57

TOTAL This Period (last page this line number only)

3,327.57

SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 1 OF 5
FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code ADAM'S COPY SERVICES 620 N. PARKERSON AVE. CROWLEY, LA 70526	Purpose of Disbursement CAMPAIGN LETTERHEAD Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-12-97	Amount of Each Disbursement This Period 179.85
B. Full Name, Mailing Address and ZIP Code AMERICAN EXPRESS P.O. BOX 1407 NEWARK, NJ 07101-147	Purpose of Disbursement CAMPAIGN CHARGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-18-97 10-13-97	Amount of Each Disbursement This Period 2434.02 399.04
C. Full Name, Mailing Address and ZIP Code CHEVRON PORT HARRE, LA	Purpose of Disbursement FUEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-14-97	Amount of Each Disbursement This Period 25.56 MEMO
D. Full Name, Mailing Address and ZIP Code BLACK'S OYSTER BAR ABBEVILLE, LA	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-20-97	Amount of Each Disbursement This Period 73.03 MEMO
E. Full Name, Mailing Address and ZIP Code CHEVRON 530 EASTERN AVE CROWLEY, LA	Purpose of Disbursement FUEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-14-97	Amount of Each Disbursement This Period 13.81 MEMO
F. Full Name, Mailing Address and ZIP Code RUTH CHRIS STEAKHOUSE METARIE, LA	Purpose of Disbursement FUNDRAISER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-20-97	Amount of Each Disbursement This Period 2178.76 MEMO
G. Full Name, Mailing Address and ZIP Code SPORTY'S CONOCO #3 LAFAYETTE, LA	Purpose of Disbursement FUEL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-18-97	Amount of Each Disbursement This Period 15.31 MEMO
H. Full Name, Mailing Address and ZIP Code HOTEL ST. MARIE 827 MOULOUSE ST. NEW ORLEANS, LA 70112	Purpose of Disbursement TRAVEL EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-16-97	Amount of Each Disbursement This Period 127.85 MEMO
I. Full Name, Mailing Address and ZIP Code NORTHWEST AIRLINES MEMPHIS, TN	Purpose of Disbursement TRAVEL EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-22-97	Amount of Each Disbursement This Period 121.00 MEMO

SUBTOTAL of Disbursements This Page (optional)

3012.91

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

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

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FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code PEABODY HOTEL 149 UNION AVE. MEMPHIS, TN 38103	Purpose of Disbursement TRAVEL EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-22-97	Amount of Each Disbursement This Period 186.86 MEMO
B. Full Name, Mailing Address and ZIP Code WALMART CROWLEY, LA	Purpose of Disbursement SUPPLIES FOR PARADE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-31-97	Amount of Each Disbursement This Period 91.18 MEMO
C. Full Name, Mailing Address and ZIP Code CITIBANK AADVANTAGE P.O. BOX 6000 THE LAKES, NV 89163-6000	Purpose of Disbursement CAMPAIGN CHARGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-27-97 9-29-97 10-23-97	Amount of Each Disbursement This Period 522.75 240.95 499.73
D. Full Name, Mailing Address and ZIP Code CHEVRON AADVANTAGE P.O. BOX 6000 THE LAKES, NV 89163-6000	Purpose of Disbursement CAMPAIGN CHARGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-26-97 12-26-97	Amount of Each Disbursement This Period 4205.92 758.85
E. Full Name, Mailing Address and ZIP Code ALBERTSON'S STORE LAFAYETTE, LA	Purpose of Disbursement SUPPLIES FOR FUNDRAISER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-29-97	Amount of Each Disbursement This Period 7.51 MEMO
F. Full Name, Mailing Address and ZIP Code AMERICAN AIRLINES WASHINGTON, DC	Purpose of Disbursement TRAVEL EXPENSE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-22-97 11-14-97	Amount of Each Disbursement This Period 406.00 MEMO 212.00 MEMO
G. Full Name, Mailing Address and ZIP Code CARLYLE GRAND CAFE 4000 SOUTH 28TH ST. ARLINGTON, VA 22206	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-26-97	Amount of Each Disbursement This Period 51.57 MEMO
H. Full Name, Mailing Address and ZIP Code COLUMBIA HOSPITAL GIFT SHOP 2425 L. ST. NW WASHINGTON, DC 20037	Purpose of Disbursement GIFT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-11-97	Amount of Each Disbursement This Period 16.92 MEMO
I. Full Name, Mailing Address and ZIP Code COPELAND'S #18 LAKE CHARLES, LA	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-19-97	Amount of Each Disbursement This Period 75.10 MEMO

SUBTOTAL of Disbursements This Page (optional)

6,228.20

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS
OPERATING EXPENDITURES

 Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CHRIS JORN FOR CONGRESS COMMITTEE, INC.

CU0316596

A. Full Name, Mailing Address and ZIP Code COUNTRY CUISINE, INC. 709 N. UNIVERSITY LAFAYETTE, LA 70506	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-27-97	Amount of Each Disbursement This Period 14.14 MEMO
B. Full Name, Mailing Address and ZIP Code FIRST NATIONAL BANK LAFAYETTE, LA	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-19-97	Amount of Each Disbursement This Period 96.00 MEMO
C. Full Name, Mailing Address and ZIP Code HUNAN DYNASTY RESTAURANT 215 PENN AVE S.E. WASHINGTON, DC 20003	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-13-97	Amount of Each Disbursement This Period 100.35 MEMO
D. Full Name, Mailing Address and ZIP Code LOGAN'S FARMS LAFAYETTE, LA	Purpose of Disbursement DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-11-97	Amount of Each Disbursement This Period 43.73 MEMO
E. Full Name, Mailing Address and ZIP Code MICHAEL STORES ALEXANDRIA, VA	Purpose of Disbursement GIFT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-24-97	Amount of Each Disbursement This Period 123.88 MEMO
F. Full Name, Mailing Address and ZIP Code STAPLES 3301 JEFFERSON DAVIS HWY. ALEXANDRIA, VA 22314	Purpose of Disbursement SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-15-97	Amount of Each Disbursement This Period 16.18 MEMO
G. Full Name, Mailing Address and ZIP Code RED HOT & BLUE RESTAURANT 3014 WILSON BLVD. ARLINGTON, VA 22209	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-1-97	Amount of Each Disbursement This Period 74.22 MEMO
H. Full Name, Mailing Address and ZIP Code TARGET STORE ALEXANDRIA, VA	Purpose of Disbursement ANSWERING MACHINE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-7-97	Amount of Each Disbursement This Period 31.34 MEMO
I. Full Name, Mailing Address and ZIP Code CAFE VERMILLIONVILLE 1304 PINHOOK RD LAFAYETTE, LA	Purpose of Disbursement FUNDRAISER Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-4-97	Amount of Each Disbursement This Period 3250.63 MEMO

SUBTOTAL of Disbursements This Page (optional)

-0-

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SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 4 OF 2
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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code RUTH'S CHRIS STEAKHOUSE 507 W. PINHOOK LAFAYETTE, LA	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-18-97	Amount of Each Disbursement This Period 48.85 MEMO
B. Full Name, Mailing Address and ZIP Code TORTILLA COAST 400 1ST ST. WASHINGTON, DC	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-24-97 10-30-97	Amount of Each Disbursement This Period 140.10 MEMO 138.88 MEMO
C. Full Name, Mailing Address and ZIP Code UNITED STATES POSTAL SERVICE WASHINGTON, DC	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-18-97 7-29-97 9-15-97	Amount of Each Disbursement This Period 13.39 MEMO 6.52 MEMO 43.38 MEMO
D. Full Name, Mailing Address and ZIP Code UNITED STATES POSTAL SERVICE WASHINGTON, DC	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-17-97 11-20-97	Amount of Each Disbursement This Period 44.46 MEMO 65.24 MEMO
E. Full Name, Mailing Address and ZIP Code U.S. HOUSE OF REPRESENTATIVES GIFT SHOP B-217 LONGWORTH BLDG. WASHINGTON, DC	Purpose of Disbursement GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-11-97 7-16-97 7-24-97	Amount of Each Disbursement This Period 59.15 MEMO 103.92 MEMO 77.88 MEMO
F. Full Name, Mailing Address and ZIP Code U.S. HOUSE OF REPRESENTATIVES GIFT SHOP B-217 LONGWORTH BLDG. WASHINGTON, DC 20515	Purpose of Disbursement GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-3-97 9-15-97 9-16-97	Amount of Each Disbursement This Period 125.07 MEMO 82.26 MEMO 6.38 MEMO
G. Full Name, Mailing Address and ZIP Code U.S. HOUSE OF REPRESENTATIVES GIFT SHOP B-217 LONGWORTH BLDG. WASHINGTON, DC 20515	Purpose of Disbursement GIFTS Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-13-97 11-20-97	Amount of Each Disbursement This Period 5.94 MEMO 90.00 MEMO
H. Full Name, Mailing Address and ZIP Code UNITED STATES POSTAL SERVICE WASHINGTON, DC	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-26-97 10-30-97 11-13-97	Amount of Each Disbursement This Period 32.00 MEMO 32.00 MEMO 8.78 MEMO
I. Full Name, Mailing Address and ZIP Code WINN DIXIE 2004 N. PARKERSON CROWLEY, LA	Purpose of Disbursement SUPPLIES FOR PARADE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-11-97	Amount of Each Disbursement This Period 125.99 MEMO

SUBTOTAL of Disbursements This Page (optional)

- 0 -

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SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code DAVID L. ANDRIKITIS 50 E. ST. S.E. WASHINGTON, DC 20003	Purpose of Disbursement PRINTING/STATIONARY	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-23-97 10-23-97	26.44 208.86
B. Full Name, Mailing Address and ZIP Code DCCC P.O. BOX 96039 WASHINGTON, DC 20090-7243	Purpose of Disbursement TRAVEL EXPENSE/DUES	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7-8-97 7-8-97	247.20 5000.00
C. Full Name, Mailing Address and ZIP Code DEMOCRATIC NATIONAL COMMITTEE FEDERAL ACT	Purpose of Disbursement REGISTRATION FEE	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7-3-97	50.00
D. Full Name, Mailing Address and ZIP Code DUCK UNLIMITED STATE CONVENTION	Purpose of Disbursement DUCK HUNT/REGISTRATION	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7-18-97 7-19-97	50.00 200.00
E. Full Name, Mailing Address and ZIP Code EVANGELINE BANK & TRUST CROWLEY, LA	Purpose of Disbursement PAYROLL TAXES	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7-11-97 8-8-97 9-9-97	291.60 291.60 437.40
F. Full Name, Mailing Address and ZIP Code EVANGELINE BANK & TRUST CROWLEY, LA	Purpose of Disbursement PAYROLL TAXES	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-14-97 11-13-97 12-3-97	291.60 407.10 231.00
G. Full Name, Mailing Address and ZIP Code EVANGELINE BANK & TRUST CROWLEY, LA	Purpose of Disbursement CHECKBOOK COVER	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12-9-97	22.62
H. Full Name, Mailing Address and ZIP Code JEFF FRITZLER 555 13TH ST. N.W. SUITE 450 WEST WASHINGTON, DC 20004	Purpose of Disbursement SUPPLIES FOR FUND- RAISER	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11-10-97	410.25
I. Full Name, Mailing Address and ZIP Code KAREN HERBERT 2569 N. CHEROKEE CROWLEY, LA 70526	Purpose of Disbursement PAYROLL/PHONE USAGE	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	7-3-97 7-8-97 7-18-97	483.93 84.21 483.93

SUBTOTAL of Disbursements This Page (optional)

9,217.74

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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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 KAREN HEBERT 2569 N. CHEROKEE CROWLEY, LA 70526	Purpose of Disbursement PAYROLL/PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-23-97 8-1-97 8-15-97	Amount of Each Disbursement This Period 77.36 483.93 483.93
B. Full Name, Mailing Address and ZIP Code KAREN HEBERT 2569 N. CHEROKEE CROWLEY, LA 70526	Purpose of Disbursement PAYROLL/PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 8-29-97 9-1-97 9-12-97	Amount of Each Disbursement This Period 483.93 49.41 483.93
C. Full Name, Mailing Address and ZIP Code KAREN HEBERT 2569 N. CHEROKEE CROWLEY, LA 70526	Purpose of Disbursement PAYROLL Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-26-97 10-9-97 10-27-97	Amount of Each Disbursement This Period 483.93 483.93 483.93
D. Full Name, Mailing Address and ZIP Code KAREN HEBERT 2569 N. CHEROKEE CROWLEY, LA 70526	Purpose of Disbursement PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-30-97	Amount of Each Disbursement This Period 52.18
E. Full Name, Mailing Address and ZIP Code KAPLAN ADVERTISING P.O. DRAWER 51500 LAFAYETTE, LA 70505	Purpose of Disbursement ADVERTISEMENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-27-97	Amount of Each Disbursement This Period 2585.68
F. Full Name, Mailing Address and ZIP Code LA DEPT OF REVENUE & TAXATION P.O. BOX 91017 BATON ROUGE, LA 70821-90	Purpose of Disbursement TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-25-97 12-9-97	Amount of Each Disbursement This Period 97.00 113.00
G. Full Name, Mailing Address and ZIP Code GEORGE BAKER 5012 SCARSDALE RD BELTHESDA, MD 20816	Purpose of Disbursement FUNDRAISING CATERING & CLEAN-UP Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-30-97 10-30-97	Amount of Each Disbursement This Period 136.75 (IN KIND 45.00 RECEIVED)
H. Full Name, Mailing Address and ZIP Code MIDLAND MARINE BANK P.O. BOX 9 BUFFALO, NY 14240	Purpose of Disbursement CAMPAIGN CHARGES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-10-97	Amount of Each Disbursement This Period 277.36
I. Full Name, Mailing Address and ZIP Code TORTILLA COAST 400 1ST ST. WASHINGTON, DC 20016	Purpose of Disbursement DINING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-9-97	Amount of Each Disbursement This Period 226.78 MEMO

SUBTOTAL of Disbursements This Page (optional)

6821.25

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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 U.S. HOUSE OF REP. GIFT SHOP B-217 LONGWORTH BLDG. WASHINGTON, DC 20515	Purpose of Disbursement GIFT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-9-97	Amount of Each Disbursement This Period 50.56 MEMO
B. Full Name, Mailing Address and ZIP Code MCNEESE COWBOY CLUB LAKE CHARLES, LA	Purpose of Disbursement DONATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-10-97	Amount of Each Disbursement This Period 300.00
C. Full Name, Mailing Address and ZIP Code OFFICE OF EMPLOYMENT SECURITY P.O. BOX 94050 BATON ROUGE, LA 70804-90	Purpose of Disbursement PAYROLL TAXES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-25-97	Amount of Each Disbursement This Period 48.43
D. Full Name, Mailing Address and ZIP Code POSTMASTER CROWLEY, LA	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 7-18-97 8-14-97 10-7-97	Amount of Each Disbursement This Period 64.00 128.00 32.00
E. Full Name, Mailing Address and ZIP Code POSTMASTER KAPLAN, LA	Purpose of Disbursement POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-12-97	Amount of Each Disbursement This Period 35.00
F. Full Name, Mailing Address and ZIP Code ANGELA SHREVE CROWLEY, LA	Purpose of Disbursement CONTRACT LABOR Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-2-97 12-12-97	Amount of Each Disbursement This Period 250.00 250.00
G. Full Name, Mailing Address and ZIP Code KIM TURNLEY 512 S. IRVING KAPLAN, LA 70548	Purpose of Disbursement TRAVEL EXPENSE/POSTAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-14-97 10-23-97 10-30-97	Amount of Each Disbursement This Period 248.00 641.62 32.00
H. Full Name, Mailing Address and ZIP Code KIM TURNLEY 512 S. IRVING KAPLAN, LA 70548	Purpose of Disbursement PAYROLL/PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10-31-97 11-14-97 11-24-97	Amount of Each Disbursement This Period 409.58 409.58 55.49
I. Full Name, Mailing Address and ZIP Code KIM TURNLEY 512 S. IRVING KAPLAN, LA 70548	Purpose of Disbursement PAYROLL/PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11-28-97 11-28-97 12-12-97	Amount of Each Disbursement This Period 409.58 118.07 409.58

SUBTOTAL of Disbursements This Page (optional)

3,840.93

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

CHRIS. JOHN FOR CONGRESS COMMITTEE, INC.

C00316596

A. Full Name, Mailing Address and ZIP Code KIM TURNLEY 512 S. IRVING KAPLAN, LA 70548	Purpose of Disbursement PAYROLL/PHONE USAGE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-26-97 12-26-97 12-31-97	Amount of Each Disbursement This Period 409.58 24.48 33.16
B. Full Name, Mailing Address and ZIP Code WHITING OFFICE SUPPLIES 312 N. PARKERSON AVE. CROWLEY, LA 70526	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-14-97 9-24-97	Amount of Each Disbursement This Period 99.95 9.15
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code UNITEMIZED DISBURSEMENTS	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 3,632.76
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

4,208.08

TOTAL This Period (last page this line number only)

33,330.11

SCHEDULE B

ITEMIZED DISBURSEMENTS

LOAN REPAYMENTS OF LOANS MADE OR GUARANTEED BY THE CANDIDATE

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CHRIS JOHN FOR CONGRESS COMMITTEE INC.

000316596

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971	Disbursement for: ☐ Primary ☐ General	9/30/97	10,000.00
	☐ Other (specify)	12/5/97	5,000.00
		12/5/97	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General		
	☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

20,000.00

TOTAL This Period (last page this line number only)

20,000.00

SCHEDULE B
ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
for each category of the
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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
LA DEMOCRATIC PARTY P.O. BOX 4385 BATON ROUGE, LA 70821-4385	NON FEDERAL CONTRIBUTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-21-97	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement (NY/13) FEDERAL CONTRIBUTION Disbursement for: ☐ Primary ☐ General ☒ Other (specify) special election	10-31-97	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,500.00

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1,500.00

SCHEDULE C
(Revised 3/80)

LOANS

Page 1 of 4 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in full) CHRIS JOHN FOR CONGRESS COMMITTEE, INC.		C00316596				
A. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☒ Primary ☐ General ☐ Other (specify):	Original Amount of Loan 5,000.00	Cumulative Payment To Date 5,000.00	Balance Outstanding at Close of This Period - 0 -			
Term: Date Incurred <u>9-3-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (ap) Secured						
List All Endorsers or Guarantors (if any) to Item A						
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☒ Primary ☐ General ☐ Other (specify):				Original Amount of Loan 10,000.00	Cumulative Payment To Date 10,000.00	Balance Outstanding at Close of This Period - 0 -
Term: Date Incurred <u>9-3-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (ap) Secured						
List All Endorsers or Guarantors (if any) to Item B						
1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)				- 0 -		
TOTALS This Period (last page in this line only)				- 0 -		
Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.						

SCHEDULE C
(Revised 3/80)

LOANS

Page 2 of 4 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in full) CHRIS JOHN FOR CONGRESS COMMITTEE, INC.		C00316596	
A. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☒ Primary ☐ General ☐ Other (specify):	Original Amount of Loan 5,000.00	Cumulative Payment To Date 5,000.00	Balance Outstanding at Close of This Period - 0 -
Terms: Date Incurred <u>9-20-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (apx) ☐ Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☒ Primary ☐ General ☐ Other (specify):	Original Amount of Loan 5,000.00	Cumulative Payment To Date - 0 -	Balance Outstanding at Close of This Period 5,000.00
Terms: Date Incurred <u>12-10-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (apx) ☐ Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			5,000.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 5, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

SCHEDULE C
(Revised 3/80)

LOANS

Page 3 of 4 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full) CHRIS JOHN FOR CONGRESS COMMITTEE, INC.		000316596		
A. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☒ Primary ☒ General ☐ Other (specify):		Original Amount of Loan 5,000.00	Cumulative Payment To Date - 0 -	Balance Outstanding at Close of This Period 5,000.00
Terms: Date Incurred <u>12-13-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (ap) ☐ Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		(This area is shaded to indicate that the information provided in the preceding section applies to this section.)		
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code				
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code				
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
B. Full Name, Mailing Address and ZIP Code of Loan Source CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☐ Primary ☒ General ☐ Other (specify):		Original Amount of Loan 2,500.00	Cumulative Payment To Date - 0 -	Balance Outstanding at Close of This Period 2,500.00
Terms: Date Incurred <u>12-26-96</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (ap) ☐ Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		(This area is shaded to indicate that the information provided in the preceding section applies to this section.)		
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
2. Full Name, Mailing Address and ZIP Code				
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
3. Full Name, Mailing Address and ZIP Code				
Name of Employer Occupation Amount Guaranteed Outstanding: \$				
SUBTOTALS This Period This Page (optional)				7,500.00
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

LOANS

Name of Committee (in Full)

CHRIS JOHN FOR CONGRESS COMMITTEE, INC.

000316596

A. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
CHRISTOPHER JOHN P.O. BOX 971 CROWLEY, LA 70527-0971 Election: ☐ Primary ☒ General ☐ Other (specify):		2,500.00	- 0 -	2,500.00
Terms: Date Incurred <u>1-15-97</u> Date Due <u>NONE</u> Interest Rate <u>NONE</u> % (apr) ☐ Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source		Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):				
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) ☐ Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer		
		Occupation		
		Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional)

2,500.00

TOTALS This Period (last page in this line only)

15,000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

☐ Hand Delivered Date of Receipt

☐ First Class Mail POSTMARKED

☒ Registered/Certified Mail POSTMARKED
1-30-98

☐ No Postmark

☐ Postmark Illegible

☒ Received from the House office of Records
and Registration Date of Receipt
2-2-98

☐ Received from the Senate Office of Public
Records Date of Receipt

☐ Other (Specify): Postmarked
and/or Date of Receipt

☐ Electronic Filing

MWD

2-2-98

PREPARER

DATE PREPARED