

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
MIKE JOHNSON FOR LOUISIANAFull Name (Last, First, Middle Initial)
A. RUSSELL H. VAN NORMAN III

Mailing Address 471 ASHLEY RDG

City	State	Zip Code
SHREVEPORT	LA	71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
SHREVEPORT EYE CLINICOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4488

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
B. CHRISTOPHER T. VICTORY

Mailing Address 244 WEDGEWOOD DR.

City	State	Zip Code
SHREVEPORT	LA	71105

FEC ID number of contributing
federal political committee.

C

Name of Employer
SEABAUGH LAW FIRMOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2016

Transaction ID : SA11AI.4286

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
C. NANCY C. VICTORY

Mailing Address 244 WEDGEWOOD DR.

City	State	Zip Code
SHREVEPORT	LA	71105

FEC ID number of contributing
federal political committee.

C

Name of Employer
BEST EFFORTSOccupation
BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4564

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

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

1500.00