

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 05 JUL 22 AM 10:09 Office Use Only

1. NAME OF COMMITTEE (In full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines John Breau Committee

ADDRESS (number and street) Post Office Box 4042 Baton Rouge LA 70821 4042

2. FEC IDENTIFICATION NUMBER C000215830 3. IS THIS REPORT NEW OR AMENDED X NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT LA

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on In the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on In the State of

6. Covering Period 04 01 2005 through 06 30 2005

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 CAROL I SPEER Signature of Treasurer Carol I Speer Date 7 14 2005

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

John Braaux Committee

Report Covering the Period:

From:

MM
04DD
01YYYY
2005

To:

MM
08DD
30YYYY
2005

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 5(b) from Line 6(a)).....	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	3687.29	13753.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	61.63	61.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3625.66	13691.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	187818.86	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9630
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
John Breaux Committee

Report Covering the Period:

From:

MM
04DD
01YYYY
2005

To:

MM
06DD
30YYYY
2005**I. RECEIPTS**

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions

0.00

0.00

from Individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

0.00

0.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

61.63

61.63

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

1463.14

2602.10

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1524.77

2663.73

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3887.29	13753.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	42850.00	151350.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ➤	46737.29	185103.52
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....		233031.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....		1524.77
25. SUBTOTAL (add Line 23 and Line 24).....		234556.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		46737.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....		187818.86

FEC FORM 32-1 (File with Form 3)

5/21

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

Name of Candidate		Candidate ID Number	
Name of Principal Campaign Committee John Breaux Committee		Committee ID Number	
		C 000215830	
Committee Address Post Office Box 4042			
City	State	ZIP	
Baton Rouge	LA	70821-4042	
Report Covering Period (check one) <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election			
	Primary	General	
1. Gross receipts of authorized committees	<input type="text" value="00"/>	<input type="text" value="00"/>	
2. Aggregate amount of contributions from personal funds of the candidate	<input type="text" value="00"/>	<input type="text" value="00"/>	
3. Gross receipts minus the candidate's personal contributions	<input type="text" value="00"/>	<input type="text" value="00"/>	

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

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

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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

NAME OF COMMITTEE (in Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address

City

Memphis

State

TN

Zip Code

37501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

61.63

Date of Receipt

06 / 15 / 2005

Transaction ID: SA14.10350

Amount of Each Receipt this Period

61.63

Tax Refund

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

SUBTOTAL of Receipts This Page (optional)

61.63

TOTAL This Period (last page this line number only)

61.63

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

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

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette

Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1367.83

Date of Receipt
MM / DD / YYYY
04 / 01 / 2005

Transaction ID: SA15.10347

Amount of Each Receipt this Period
228.87

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

B. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette

Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2259.93

Date of Receipt
MM / DD / YYYY
05 / 31 / 2005

Transaction ID: SA15.10348

Amount of Each Receipt this Period
892.10

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

C. Full Name (Last, First, Middle Initial)
Donaldson Lufkin Jenrette

Mailing Address 277 Park Avenue

City State Zip Code
New York NY 10172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2602.10

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: SA15.10349

Amount of Each Receipt this Period
342.17

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

SUBTOTAL of Receipts This Page (optional)	1463.14
TOTAL This Period (last page this line number only)	1463.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 8/21
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial) A. Bell South		Transaction ID: SB17.10358 Date of Disbursement 04 / 04 / 2005	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 28.80	
City Atlanta	State GA	Zip Code 30385-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement	Telephone/Fax	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:			

Full Name (Last, First, Middle Initial) B. Bell South		Transaction ID: SB17.10359 Date of Disbursement 04 / 14 / 2005	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 28.80	
City Atlanta	State GA	Zip Code 30385-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement	Telephone/Fax	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:			

Full Name (Last, First, Middle Initial) C. Bell South		Transaction ID: SB17.10362 Date of Disbursement 08 / 17 / 2005	
Mailing Address 85 Annex		Amount of Each Disbursement this Period 28.82	
City Atlanta	State GA	Zip Code 30385-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement	Telephone/Fax	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type	
State: District:			

SUBTOTAL of Disbursements This Page (optional)	86.42
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 / 21
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial) A. Bell South Corporation		Transaction ID: SB17.10360 Date of Disbursement	
Mailing Address 1133 21st Street Suite 900		MM / DD / YYYY 05 / 14 / 2005	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 28.87
Purpose of Disbursement Telephone/Fax Candidate Name		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Climastor		Transaction ID: SB17.10354 Date of Disbursement	
Mailing Address Post Office Box 84058		MM / DD / YYYY 04 / 01 / 2005	
City Baton Rouge	State LA	Zip Code 70884-4058	Amount of Each Disbursement this Period 43.00
Purpose of Disbursement Records Storage Candidate Name		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Climastor		Transaction ID: SB17.10355 Date of Disbursement	
Mailing Address Post Office Box 84058		MM / DD / YYYY 05 / 01 / 2005	
City Baton Rouge	State LA	Zip Code 70884-4058	Amount of Each Disbursement this Period 46.00
Purpose of Disbursement Records Storage Candidate Name		Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional)	117.87
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 10/21

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

John Breaux Committee

Full Name (Last, First, Middle Initial)

A. Climastor

Mailing Address Post Office Box 84058

City Baton Rouge State LA Zip Code 70834-4058

Purpose of Disbursement
Records Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB17.10356

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

46.00

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

Full Name (Last, First, Middle Initial)

B. Carol I. Spear

Mailing Address 2044 Lake Hills Parkway

City Baton Rouge State LA Zip Code 70808-1453

Purpose of Disbursement
Campaign Accounting & Reporting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB17.10351

Date of Disbursement

04 / 01 / 2005

Amount of Each Disbursement this Period

1200.00

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

Full Name (Last, First, Middle Initial)

C. Carol I. Spear

Mailing Address 2044 Lake Hills Parkway

City Baton Rouge State LA Zip Code 70808-1453

Purpose of Disbursement
Campaign Accounting & Reporting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB17.10352

Date of Disbursement

05 / 01 / 2005

Amount of Each Disbursement this Period

1200.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2446.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 11 / 21
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial) A. Carol I. Speer		Transaction ID: SB17.10353 Date of Disbursement 08 / 01 / 2005	
Mailing Address 2044 Lake Hills Parkway		Amount of Each Disbursement this Period 1200.00	
City Baton Rouge	State LA	Zip Code 70808-1453	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Campaign Accounting & Reporting		Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. U. S. Postmaster		Transaction ID: SB17.10357 Date of Disbursement 05 / 25 / 2005	
Mailing Address Main Branch, 251 Florida Street		Amount of Each Disbursement this Period 37.00	
City Baton Rouge	State LA	Zip Code 70821	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Postage		Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	1237.00
TOTAL This Period (last page this line number only)	3687.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12/21
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial) A. A LOT OF PEOPLE WHO SUPPORT JEFF BINGAMAN	Transaction ID: SB21.10375 Date of Disbursement 04 / 18 / 2005
Mailing Address PO BOX 16210	Amount of Each Disbursement this Period 1000.00
City ALBUQUERQUE State NM Zip Code 87181	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution	Category/Type
Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Alzheimer's Association	Transaction ID: SB21.10380 Date of Disbursement 04 / 29 / 2005
Mailing Address 225 N. Michigan Avenue	Amount of Each Disbursement this Period 100.00
City Chicago State IL Zip Code 60601	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. AMERIPAC	Transaction ID: SB21.10403 Date of Disbursement 06 / 21 / 2005
Mailing Address 140 COVANT #2	Amount of Each Disbursement this Period 1000.00
City MANCHESTER State NH Zip Code 03102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement Contribution	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2100.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. Full Name (Last, First, Middle Initial)
BILL NELSON FOR U S SENATE

Mailing Address **500 RED SAIL WAY**

City **SATELITE BEACH** State **FL** Zip Code **32937**

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 00

Transaction ID: SB21.10371
Date of Disbursement
04 / 18 / 2005

Amount of Each Disbursement this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
BILL NELSON FOR U S SENATE

Mailing Address **500 RED SAIL WAY**

City **SATELITE BEACH** State **FL** Zip Code **32937**

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 00

Transaction ID: SB21.10408
Date of Disbursement
05 / 28 / 2005

Amount of Each Disbursement this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Bill Richardson for Governor

Mailing Address

City **Santa Fe** State **NM** Zip Code

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.10389
Date of Disbursement
05 / 25 / 2005

Amount of Each Disbursement this Period
1000.00

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

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 14 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 21 19b	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial) A. CARPER FOR SENATE		Transaction ID: SB21.10382
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR		Date of Disbursement 05 / 04 / 2005
City NEW CASTLE	State DE	Zip Code 19720
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: DE	District: 00	Category/Type

Full Name (Last, First, Middle Initial) B. CARPER FOR SENATE		Transaction ID: SB21.10384
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR		Date of Disbursement 05 / 18 / 2005
City NEW CASTLE	State DE	Zip Code 19720
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: DE	District: 00	Category/Type

Full Name (Last, First, Middle Initial) C. CARPER FOR SENATE		Transaction ID: SB21.10385
Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR		Date of Disbursement 05 / 18 / 2005
City NEW CASTLE	State DE	Zip Code 19720
Purpose of Disbursement Contribution	Candidate Name	Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: DE	District: 00	Category/Type

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:
(check only one)

PAGE 15/21

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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 NAME OF COMMITTEE (In Full)
John Breaux Committee

Full Name (Last, First, Middle Initial)

A. DSCC-Federal

Mailing Address 430 S. Capitol Street NE

City	State	Zip Code
Washington	DC	20003

 Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.10405

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

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

Full Name (Last, First, Middle Initial)

B. DSCC of Louisiana-Federal

Mailing Address Post Office Box 4385

City	State	Zip Code
Baton Rouge	LA	70821-4385

 Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.10407

Date of Disbursement

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

Amount of Each Disbursement this Period

1500.00

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

Full Name (Last, First, Middle Initial)

C. FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE

Mailing Address PO Box 50731

City	State	Zip Code
Washington	DC	20091

 Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

 Office Sought: House
 Senate
 President

 Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.10373

Date of Disbursement

M	M	D	Y	Y	Y	Y
0	4	1	8	2	0	0

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 16 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. FRIENDS OF JOE LIEBERMAN

Full Name (Last, First, Middle Initial)
FRIENDS OF JOE LIEBERMAN

Transaction ID: SB21.10377
Date of Disbursement
04 / 18 / 2005

Mailing Address PO BOX 4322
STATE HOUSE SQUARE

Amount of Each Disbursement this Period
1000.00

City HAMDEN State CT Zip Code 06514

Purpose of Disbursement
Contribution

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

Candidate Name

Category/Type

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

State: CT District: 00

B. FRIENDS OF JOE LIEBERMAN

Full Name (Last, First, Middle Initial)
FRIENDS OF JOE LIEBERMAN

Transaction ID: SB21.10386
Date of Disbursement
05 / 18 / 2005

Mailing Address PO BOX 4322
STATE HOUSE SQUARE

Amount of Each Disbursement this Period
1000.00

City HAMDEN State CT Zip Code 06514

Purpose of Disbursement
Contribution

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

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
Other (specify) ▼

State: CT District: 00

C. FRIENDS OF KENT CONRAD

Full Name (Last, First, Middle Initial)
FRIENDS OF KENT CONRAD

Transaction ID: SB21.10383
Date of Disbursement
05 / 17 / 2005

Mailing Address PO BOX 812

Amount of Each Disbursement this Period
1000.00

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
Contribution

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

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
Other (specify) ▼

State: ND District: 00

SUBTOTAL of Disbursements This Page (optional) ▶ 3000.00

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 17/21

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (in Full)

John Braux Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARY LANDRIEU INC

Mailing Address 607 14TH STREET NW SUITE 800
SUITE 1434

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

State: LA District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB21.10412

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

B. FRIENDS OF RAHM EMANUEL

Mailing Address P.O. Box 101124

City Chicago State IL Zip Code 60610

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

State: IL District: 5

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB21.10367

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. KENNEDY FOR SENATE 2006

Mailing Address 301 4TH ST NE SUITE 202

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

State: MA District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB21.10414

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 18 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breau Committee

Full Name (Last, First, Middle Initial) A. KENNEDY FOR SENATE 2006		Transaction ID: SB21.10387	
Mailing Address 301 4TH ST NE SUITE 202		Date of Disbursement 05 / 18 / 2005	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: <input checked="" type="checkbox"/> Primary	2008 <input type="checkbox"/> General	
State: MA	District: 00	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Louisiana State University Foundation		Transaction ID: SB21.10383	
Mailing Address 3838 W. Lakeshore Drive		Date of Disbursement 04 / 14 / 2005	
City Baton Rouge	State LA	Zip Code 70808	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contribution		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary	<input type="checkbox"/> General	
State:	District:	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mac Campbell for Arkansas Treasurer		Transaction ID: SB21.10394	
Mailing Address Post Office Box 251581		Date of Disbursement 06 / 17 / 2005	
City Little Rock	State AR	Zip Code 72225	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary	<input type="checkbox"/> General	
State:	District:	<input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 19/21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3241

City Cheyenne State WY Zip Code 82001

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21.10378
Date of Disbursement 04 / 29 / 2005

Amount of Each Disbursement this Period 2500.00

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

B. MELANCON, CHARLIE JR

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 549
PO BOX 549

City Napoleonville State LA Zip Code 70390

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: LA District: 3

Disbursement For: 2006 Primary General Other (specify) ▼

Transaction ID: SB21.10400
Date of Disbursement 05 / 25 / 2005

Amount of Each Disbursement this Period 2000.00

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

C. MELANCON, CHARLIE JR

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 549
PO BOX 549

City Napoleonville State LA Zip Code 70390

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: LA District: 3

Disbursement For: 2006 Primary General Other (specify) ▼

Transaction ID: SB21.10402
Date of Disbursement 05 / 25 / 2005

Amount of Each Disbursement this Period 2000.00

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

SUBTOTAL of Disbursements This Page (optional) 6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 20 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. PRYOR, MARK LUNSFORD

Full Name (Last, First, Middle Initial)
PRYOR, MARK LUNSFORD

Mailing Address 37 CALAIS COURT

City LITTLE ROCK State AR Zip Code 72223

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: AR District: 00

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21.10385
Date of Disbursement
04 / 14 / 2005

Amount of Each Disbursement this Period
1000.00

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

B. SALAZAR FOR CONGRESS

Full Name (Last, First, Middle Initial)
SALAZAR FOR CONGRESS

Mailing Address PO BOX 28232

City FRESNO State CA Zip Code 93729

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: CA District: 20

Disbursement For: 2006 Primary General Other (specify) ▼

Transaction ID: SB21.10391
Date of Disbursement
05 / 25 / 2005

Amount of Each Disbursement this Period
1000.00

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

C. SCHULTZ DEBBIE WASSERMAN

Full Name (Last, First, Middle Initial)
SCHULTZ DEBBIE WASSERMAN

Mailing Address 4478 FOXGLOVE LN

City WESTON State FL Zip Code 33331

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: FL District: 20

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: SB21.10408
Date of Disbursement
06 / 28 / 2005

Amount of Each Disbursement this Period
250.00

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

SUBTOTAL of Disbursements This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 21 / 21
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John Breaux Committee

A. STABENOW FOR US SENATE

Full Name (Last, First, Middle Initial)
STABENOW FOR US SENATE

Mailing Address PO BOX 4945

City EAST LANSING State MI Zip Code 48826

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: MI District: 00

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB21.10389
Date of Disbursement
04 / 18 / 2005

Amount of Each Disbursement this Period
1000.00

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

B. The Pan-Massachusetts Challenge

Full Name (Last, First, Middle Initial)
The Pan-Massachusetts Challenge

Mailing Address 77 Fourth Street

City Needham State MA Zip Code 02494

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB21.10387
Date of Disbursement
06 / 17 / 2005

Amount of Each Disbursement this Period
1000.00

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

C. Washington Tennis Foundation

Full Name (Last, First, Middle Initial)
Washington Tennis Foundation

Mailing Address 16th & Kennedy Streets NW

City Washington State DC Zip Code 20011

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB21.10389
Date of Disbursement
06 / 17 / 2005

Amount of Each Disbursement this Period
4500.00

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

SUBTOTAL of Disbursements This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	42850.00

AUX SENATE COMMITTEE
Box 4042
St. LA 70821-4042



7004 1160 0003 2937 9385

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JUL 22 2008

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BEHR: OFFICE BUILDING
SUITE 239
WASHINGTON, DC 20510-3118
PHONE (202) 224-0122

United States Senate

OFFICE OF THE SECRETARY

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Postmark

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UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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