

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

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

FOR LINE NUMBER: PAGE 581 / 805

(check only one)

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

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NAME OF COMMITTEE (In Full)

Chris John for US Senate

A. Full Name (Last, First, Middle Initial)
Sammy B. Nunez US Senate Committee

Mailing Address 2016 Pakenham Dr

City State Zip Code
Chalmette LA 70043-4720

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2004
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

12 / 08 / 2003

Transaction ID: C101468

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Walter M. Sanchez

Mailing Address PO Box 3305

City State Zip Code
Lake Charles LA 70602

FEC ID number of contributing federal political committee.

C

Name of Employer
Lorenzi, Sanchez & Palsy, LLP

Occupation
Attorney

Receipt For: 2004
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

12 / 11 / 2003

Transaction ID: C100588

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Don Savoie

Mailing Address PO Box 58

City State Zip Code
Belle Rose LA 70341-0058

FEC ID number of contributing federal political committee.

C

Name of Employer
Simmons & Savoie Insurance Agency, Inc

Occupation
Owner

Receipt For: 2004
 Primary General
 Other (specify)▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

08 / 01 / 2003

Transaction ID: C101274

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a)(441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)