STATEMENT OF ORGANIZATION

OFFICE USE ONLY

PAC 5/0 10 1/20

10000623

1. Name and Address of Committee
LA. Legislative Leadership PAC.

2. Date of this Statement
1-15-2010

3. Estimated Membership
N/A New PAC

4. Amended Statement?
____ Yes X No

Check if:
New Committee _____ Monthly Filer _____

Rec#8102
c/c#1001

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name	b. Position	c. Address
Kenneth Pickering	Chairperson	301 Magazine St. New Orleans LA 70130
Kathy Lynn Honaker	Treasurer	301 Delaronde St. New Orleans LA 70114

6. Affiliated Organizations
(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name b. Address c. Relationship to Committee

N/A

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name b. Address

First NBC PO Box 61035 New Orleans LA 70161-1035
300033298

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: ____ Principal Campaign Committee _____ Subsidiary Committee

b. Name of Candidate N/A

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report KATHY L. HONAKER

b. Daytime Telephone 504 481 9511

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

This 15th day of January 2010

x [signature] 504-581-1222
Signature of Committee Chairperson Daytime Telephone Number

x Kathy L. Honaker 504 481-9511
Signature of Committee Treasurer, if any Daytime Telephone Number

Form 200, Rev. 12/03