STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee

LMGMA PAC, INC.
16 ADMIRALTY CT.
NEW ORLEANS, LA 70131

Check If:

New Committee _____ Monthly Filer _____

2. Date of this Statement

1/15/10

3. Estimated Membership

3

4. Amended Statement?

____ Yes X No

PAC 10
S/O
1/19
Rec 8087
Chk 6

10000624

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

a. Name: STEWART J CLARK

b. Position: Chairperson / Treasurer

c. Address: 16 ADMIRALTY CT. NEW ORLEANS LA 70131

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

a. Name: LMGMA

b. Address: PO BOX 60275 LAFAYETTE, LA 70596

c. Relationship to Committee: NON PROFIT THAT ESTABLISHED PAC

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: LMGMA

b. Address: PO BOX 60275 LAFAYETTE, LA 70596

2010 JAN 20 PM 4:21
ELECTRONIC FILING CAMPAIGN FINANCE RECEIVED

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

b. Name of Candidate

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report: STEWART J. CLARK

b. Daytime Telephone: 504-391-9304 or 504-388-3240

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 15 day of JANUARY, 2010

Stewart J Clark
Signature of Committee Chairperson

504-391-9304 / 504-388-3240
Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

Form 200, Rev. 12/03