STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee

New Orleans East Leadership
5901 Wright Road
New Orleans, LA 70128

Check if:

New Committee _____ Monthly Filer _____

2. Date of this Statement

2/1/2010

3. Estimated Membership

13

4. Amended Statement?

____ Yes ____ No

5/0 10
2/3

Rec#8275
CH-T1000

10000903

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

a. Name	b. Position	c. Address
Dwight Jarrett	Chairperson	5901 Wright Rd New Orleans, LA 70128
Lynn D. Cawthorne	Treasurer	1511 Oakdale St Shreveport LA 71108

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
Capital Bank	7103 W. 70th Street Shreveport, LA 71106

2010 FEB -3 PM 2:20
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 Lynn D. Cawthorne

b. Daytime Telephone 504-427-8167

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 1st day of February, 2010.

[signature]
Signature of Committee Chairperson

504-723-2309
Daytime Telephone Number

[signature]
Signature of Committee Treasurer, if any

504-427-8167
Daytime Telephone Number

Form 200, Rev. 12/03

HAND DELIVERED