STATEMENT OF DISSOLUTION

Each political committee, including any subsidiary committee, which after having filed an annual statement of organization wishes to dissolve or disband and (1) determines that it has not received any contributions, transfers of funds, or loans and has not made expenditures, transfers of funds, or loans in the aggregate during the calendar year in excess of five hundred dollars ($500) and does not anticipate doing so or (2) determines that it will no longer receive any contributions, loans, or transfers of funds and will no longer make any expenditures, loans, or transfers of funds, shall file a statement of dissolution with the supervisory committee prior to dissolving. All committee debts and obligations must be paid or otherwise extinguished and any funds on hand must be expended or otherwise distributed before a political committee can dissolve.

Mail to: CAMPAIGN FINANCE, Post Office Box 4388, Baton Rouge, LA 70821

1. Full Name and Address of Political Committee
Citizens for Accessible Healthcare PAC
7901 Lloyds Avenue
Chalmette, LA 70043

OFFICE USE ONLY
11/10
S/D
12/13

10007937

2. Name and Address of Committee Chairperson
Michael Montgomery
7901 Lloyds Avenue
Chalmette, LA 70043

3. Was this Committee the Principal Campaign Committee of a Candidate? ____ Yes X No

If yes, give the name of the Candidate ____

4. Was this Committee a Subsidiary Committee designated by either a Candidate or a Principal Campaign Committee? ____ Yes X No

If yes, give the name of the Candidate or Committee ____

5. WE HEREBY CERTIFY that this committee has no unpaid debts or obligations and that all funds have been expended or otherwise distributed.

WE HEREBY CERTIFY that this committee (1) has not received contributions, transfers of funds, or loans and has not made expenditures, transfers of funds, or loans in the aggregate during the calendar year in excess of five hundred dollars ($500) and does not anticipate doing so, or (2) will receive no contributions, transfers of funds, or loans and will make no expenditures, transfers of funds, or loans during the remainder of the calendar year.

WE FURTHER CERTIFY that a completed Committee's Report accompanies this Statement of Dissolution.

This 13th day of December, 2010

Signature of Committee Chairperson — 504-618-6491 Daytime Telephone Number

Signature of Committee Treasurer, if any — 504-289-0200 Daytime Telephone Number

Form 205, Rev. 3/08, Page Rev. 10/02, Page Rev. 02/06