STATEMENT OF ORGANIZATION

OFFICE USE ONLY

PAC
S/O
6/29
R# 6781
C# 71000

11003568

1. Name and Address of Committee (TLP)
TRAITS of LEADERSHIP PACK
P.O. BOX 945
SHREVEPORT, LA
71163-0945

Check If:
New Committee ✓ Monthly Filer ✓

2. Date of this Statement
6-20-2011

3. Estimated Membership
2

4. Amended Statement?
___ Yes ✓ No

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

a. Name	b. Position	c. Address
PATRICK WILLIAMS	Chairperson	5636 SOUTH LAKESHORE #632 SHREVEPORT, LA 71119
FLOYD KIRKSEY	Treasurer	9312 CASTLEBROOK DR. SHREVEPORT, LA 71129

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	

LOUISIANA ETHICS ADMINISTRATION CAMPAIGN FINANCE RECEIVED
2011 JUN 30 AM 9:28

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
REGIONS BANK	~~TEXAS ST~~ PINES ROAD SHREVEPORT, LA.

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

b. Name of Candidate	c. Office Bought by the Candidate
N/A	N/A

9. a. Name of Person Preparing Report JOHN SMITH ACCOUNTANT.

b. Daytime Telephone 318-221-7071

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 20 day of June

[signature]
Signature of Committee Chairperson

318-518-7535
Daytime Telephone Number

[signature]
Signature of Committee Treasurer, if any

318-518-5622
Daytime Telephone Number

Form 200, Rev. 12/03