STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1/3 12

PAC S/O 1/13

1. Name and Address of Committee
TBI PAC - ISSUES
P.O. Box 416

Mansura LA 71350

Check if new committee ____

2. Date of this Statement
01/04/2012

3. Estimated Membership
0

4. Amended Statement?
____Yes X No

Rec # 7042
#1052

12000342

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

Position	Name	Address
Chairperson		
Treasurer		

Please see attached sheets.

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

Name	Address	Relationship to Committee

Please see attached sheets.

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

Name	Address

Please see attached sheets.

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

Please see attached sheets.

9. Name of Person Preparing Report

Daytime Telephone

Please see attached sheets.

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.

Dated 01/04/2012

Earl J Barbry Sr.
Signature of Committee Chairperson

318 253-9767
Daytime Telephone Number

Douglas C Burke
Signature of Committee Treasurer, if any

318 253-9767
Daytime Telephone Number

2012 JAN 17 PM 9:34
RECEIVED

Form 200, Rev 3/98

Affiliated Persons / Organizations

Name and Address of Chair Person Chairman Earl J Barbry Sr 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Treasurer Douglas C Burke 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Deputy Treasurer David Rivas, Jr 151 Melacon Drive Marksville LA 71351 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: Asst Secretary/Campaign Treasurer
Name and Address of Financial Institution The Cottonport Bank 144 South Main Marksville LA 71351 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: