STATEMENT OF ORGANIZATION

1. Name and Address of Committee

Louisiana Association of Health Plans PAC
17425 Jefferson Highway, Suite C
Baton Rouge, LA 70817

2. Date of this Statement

March 15, 2012

3. Estimated Membership

7

4. Amended Statement?

✓ Yes No

OFFICE USE ONLY

PAC
Amendment
S/O
3/23

12000495

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

a. Name	b. Position	c. Address
Jeff Drozda	Chairperson	17425 Jefferson Highway, Suite C, Baton Rouge, LA 70817

(continued on attachment)

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
Louisiana Association of Health Plans	17425 Jefferson Highway, Ste C. Baton Rouge, LA 70817	Established PAC; Oversees Financial Activity

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
Iberia Bank	P.O. Box 83229, Baton Rouge, LA 70884-3229

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

Danielle Peavy

b. Daytime Telephone (225) 756-3227

2012 MAR 26 PM 9:18

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 15th day of March, 2012.

Signature of Committee Chairperson

225-756-3227
Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

Form 200, Rev. 12/03

AMENDMENT

STATEMENT OF ORGANIZATION

1. Name and Address of Committee

Louisiana Association of Health Plans PAC
17425 Jefferson Highway, Suite C
Baton Rouge, LA 70817

2. Date of This Statement

January 20, 2012

3. Estimated Membership

7

4. Amended Statement?

Yes ✓ No

OFFICE USE ONLY 12

PAC
S/O
1/23

Rec # 7130
#1242

12000495

2012 JAN 25 AM 11:09

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

a. Name	b. Position	c. Address
Gil Dupré	Chairperson	17425 Jefferson Highway, Suite C, Baton Rouge

(continued on attachment)

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

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b. Name of Candidate

c. Office Sought by the Candidate

SCANNED
JAN 26

9. a. Name of Person Preparing Report

Gil Dupré

By:

b. Daytime Telephone (225) 756-3227

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 20th day of January 2012

Signature of Committee/Chairperson

225-756-3227
Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

Form 200, Rev. 12/03

Statement of Organization
Louisiana Association of Health Plans PAC

5.	Name	Position	Address
	Michele Calandro	Member	PO Box 90829 Baton Rouge, La 70898
	Glen Golemi	Member	3838 N. Causeway, Ste 2600 Metairie, LA 70002
	Mike Putiak	Member	3838 N. Causeway, Ste 2200 Metairie, LA 70002
	Jeff Fernandez	Member	1 Galleria Blvd, Ste 1122 Metairie, LA 70001

AMENDMENT

Statement of Organization
Louisiana Association of Health Plans PAC

5.

Name	Position	Address
Michele Calandro	Member	PO Box 90829 Baton Rouge, La 70898
Glen Golemi	Member	3838 N. Causeway, Ste 2600 Metairie, LA 70002
Mike Putiak	Member	3838 N. Causeway, Ste 2200 Metairie, LA 70002
Jeff Fernandez	Member	1 Galleria Blvd, Ste 1122 Metairie, LA 70001