STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee

Louisiana Insurance Political Action Committee
8440 Jefferson Highway, Suite 301
Baton Rouge, LA 70809

2. Date of this Statement

Jan. 15, 2000

3. Estimated Membership

3

4. Amended Statement?

____ Yes __X__ No

PAC
S/O Rec #496508
1/4 #539

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

a. Name	b. Position	c. Address
C. J. Blache	Chairperson	8440 Jefferson Highway, Suite 301, Baton Rouge, LA 70809
Arwin P. Nichols	Treasurer	8440 Jefferson Highway, Suite 301, Baton Rouge, LA 70809

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

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
Bank One	451 Florida Boulevard, Baton Rouge, LA 70801

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 Arwin P. Nichols

b. Daytime Telephone 225-929-7033

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 16th day of January, 2000.

Signature of Committee Chairperson

225-929-7033
Daytime Telephone Number

Arwin P. Nichols
Signature of Committee Treasurer, if any

225-929-7033
Daytime Telephone Number

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