STATEMENT OF ORGANIZATION

OFFICE USE ONLY

S/O 1/31

0200956

1. Name and Address of Committee
Committee to Elect Angelique A. Reed
P. O. Box 58508
New Orleans, Louisiana 70112

2. Date of this Statement
January 31, 2002

3. Estimated Membership
20

4. Amended Statement?
____ Yes XX No

REC # 8019
3155

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

a. Name	b. Position	c. Address
Barry Wright	Chairperson	8316 Sycamore Place New Orleans, LA 70118
Carolyn Myers	Treasurer	5137 Wentworth New Orleans, LA 70126

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		

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
Liberty Bank & Trust	Post Office Box 60131 New Orleans, LA 70160

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

b. Name of Candidate
Angelique A. Reed

c. Office Sought by the Candidate
Judge, First City Court

9. a. Name of Person Preparing Report Carolyn E. Myers

b. Daytime Telephone (504) 244-1244

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 31st day of January, 2002

[signature]
Signature of Committee Chairperson

(504) 896-8400
Daytime Telephone Number

Carolyn E. Myers
Signature of Committee Treasurer, if any

504 244-1244
Daytime Telephone Number

Form 800, Rev. 3/98