STATEMENT OF ORGANIZATION

OFFICE USE ONLY

PAC
S/O
1/31

0301022

1. Name and Address of Committee

LA CRNA Political Action Committee
P.O. Box 55876
New Orleans, LA 70055

2. Date of this Statement

January 31, 2003

3. Estimated Membership

130

4. Amended Statement?

____ Yes X 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
James W. Havenar	Chairperson	P.O. Box 52091, Lafayette, LA 70505
David M. Boudreaux	Treasurer	902 N. Bermessy St., New Orleans, LA 70119

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 Nurse Anesthetists, Ltd.	P.O. Box 55261 Metairie, LA 70055	Professional Association, some of the members of which created the 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
Hibernia National Bank	1501 Veterans Boulevard, Metairie, LA 70001

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

b. Name of Candidate

N/A

c. Office Sought by the Candidate

N/A

9. a. Name of Person Preparing Report Chris G. Young

b. Daytime Telephone (504) 828-3930

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 31 st. day of January 2003

Signature of Committee Chairperson

(504) 828-7500
Daytime Telephone Number

Signature of Committee Treasurer, if any

(504) 828-7500
Daytime Telephone Number

Form 200, Rev. 3/98