STATEMENT OF ORGANIZATION

OFF

ICE USE ONLY

1. Name and Address of Committee Louisiana Pharmacists Political Action Committee Post Office Box 370 Ville Platte, LA 70586

2. Date of this Statement Jan. 15, 2003

3. Estimated Membership 10

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 Bernard LeBas Chairperson Post Office Box 370, Ville Platte, LA 70586 Blake Pitre Treasurer 301 Roberta Grove Blvd., Houma, LA 70363

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 The Evangeline Bank and Trust Company, 497 W. Main Street, Ville Platte, LA 70586

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

b. Name of Candidate

Office Sought by the Candidate

9. a. Name of Person Preparing Report Bernard LeBas b. Daytime Telephone 337-363-3456

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 January 2003

337-363-3456 Bernard LeBas
Signature of Committee Chairperson

Daytime Telephone Number

Signature of Committee Treasurer, if any

985-673-7496
Daytime Telephone Number

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