STATEMENT OF ORGANIZATION

OFFICE USE ONLY

PAC
S/O
9/5

0304729

1. Name and Address of Committee

President's PAC
109 N. Lexington - P. O. Box 262
Bunkie, LA 71322

2. Date of this Statement

August 29, 2003

3. Estimated Membership

1

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
Donald E. Hines, M.D.	Chairperson	109 N. Lexington - P. O. Box 262 Bunkie, LA 71322
Same	Treasurer	

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
Friends of Don Hines	P. O. Box 262 Bunkie, LA 71322	Personal Campaign Fund

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
Union Bank	305 N. Main Street, Marksville, LA 71351
Cottonport Bank	122 S. W. Main St., Bunkie, LA 71322

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

9. a. Name of Person Preparing Report: Mary Devillier

b. Daytime Telephone: (318) 346-4619

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 29 day of August 2003

Donald E Hines
Signature of Committee Chairperson

(318) 346-4619
Daytime Telephone Number

Donald E. Hines, M.D.

N/A
Signature of Committee Treasurer, if any

Daytime Telephone Number

Form 200, Rev. 3/88