STATEMENT OF ORGANIZATION

OFFICE USE ONLY 04

0400144

S/O 1/12

Rec # 4843
2762

1. Name and Address of Committee
The Morial Committee
201 St. Charles Ave.
P.O. Box 80
Suite 3100
New Orleans LA 70170-3100

2. Date of this Statement
JAN. 2004

3. Estimated Membership

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
Cherryle Temple	Chairperson Treasurer	201 St. Charles Ave 31st Fl. NOLA

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 of Louisiana	300 St. Charles Ave. N.O.LA 70130

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
Cherryle Temple
b. Daytime Telephone 504-207-7339

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 12 day of January, 2004.

Cherryle Temple
Signature of Committee Chairperson

(504) 207-7339
Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

Form 200, Rev. 3/98