STATEMENT OF ORGANIZATION

OFFICE USE ONLY

Amendment
S/O
#400311

400311

Name and Address of Committee

LaTeshia Walker-Alford
PO Box 422
Shreveport, LA 71133-0422

2. Date of this Statement: 1-8-04

3. Estimated Membership: 2

4. Amended Statement? X Yes __ No

Check if:
New Committee _____ Monthly Filer _____

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

a. Name	b. Position	c. Address
Ronald J. Miciotto	Chairperson	628 Stoner Ave. Shreveport, LA 71101
Ronald J. Miciotto	Treasurer	628 Stoner Ave. Shreveport, LA 71101

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		

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 ONE	400 Texas Avenue Shreveport, LA 71101

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

Name of Candidate: LaTeshia Walker-Alford

c. Office Sought by the Candidate: Judge

a. Name of Person Preparing Report: Ronald J. Miciotto

b. Daytime Telephone: 318-424-0200

I 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 ____ day of _____, _____

Signature of Committee Chairperson — Daytime Telephone Number

Signature of Committee Treasurer, if any — Daytime Telephone Number

200, Rev. 12/03

AMENDMENT

STATEMENT OF ORGANIZATION

OFFICE USE ONLY 04

S/O 1/20 SCANNED FEB 11 2004 By AM

0400311

Rec # 4914
9999990

1. Name and Address of Committee

LaLeshia Walker-Alford
P.O.Box 31109
Shreveport, LA 71130

2. Date of this Statement: 1-8-04

3. Estimated Membership: 2

4. Amended Statement? ____ Yes __X__ No

Check if:

New Committee _____ Monthly Filer _____

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

a. Name	b. Position	c. Address
Ronald J. Miciotto	Chairperson	628 Stoner Ave. Shreveport, LA 71101
Ronald J. Miciotto	Treasurer	628 Stoner Ave. Shreveport, LA 71101

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	
BANK ONE	400 Texas Avenue Shreveport, LA 71101	065400137

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

b. Name of Candidate: LaLeshia Walker-Alford

c. Office Sought by the Candidate: Judge

9. a. Name of Person Preparing Report: Ronald J. Miciotto

b. Daytime Telephone: 318-424-0200

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 16 day of Jan. 04

Signature of Committee Chairperson

318-424-0200
Daytime Telephone Number

Signature of Committee Treasurer, if any

318-424-0200
Daytime Telephone Number

JAN 22 PM 2:43

Form 200, Rev. 12/03