STATEMENT OF ORGANIZATION

1. Name and Address of Committee	2. Date of this Statement	OFFICE USE ONLY 05
Louisiana Association of Health Plans 2325 Weymouth Drive, Suite M Baton Rouge, LA 70809	January 6, 2005	PAC S/O 1/7
	3. Estimated Membership 15	
	4. Amended Statement? ____ Yes X No	Rec # 521L #1044

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LOUISIANA ETHICS ADMINISTRATION CAMPAIGN FINANCE RECEIVED

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

a. Name	b. Position	c. Address
Gil Dupré	Chairperson	2325 Weymouth Drive, Suite M, Baton Rouge, LA 70809

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 Health Plans	2325 Weymouth Drive, Suite M Baton Rouge, LA 70809	Established PAC; Oversees Financial Activity

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
Iberia Bank	P.O. Box 83229, Baton Rouge, LA 70884-3229

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

Gil Dupré

b. Daytime Telephone (225) 927-2774

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 6th day of January, 2004.

Signature of Committee/Chairperson

225-927-2774
Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

Form 200, Rev. 12/03