# STATEMENT OF ORGANIZATION

OFFICE USE ONLY 05

1. Name and Address of Committee
Louisiana Eye PAC
2515 Line
Shreveport La 71104
120 Meadowcrest #330
Gretna, La 70056

2. Date of this Statement
1/31/2005

3. Estimated Membership
20

4. Amended Statement?
___ Yes ___ No

PAC
S/O
2/8

Rec # 5493
#1016

0502200

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

a. Name
Donald Texada, MD

b. Position
Chairperson
Treasurer

c. Address
2515 Line Spurr La 71104

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

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

b. Name of Candidate

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report Donald Texada, MD

b. Daytime Telephone 318-221-8646

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 31st day of Jan, 2005

[signature]
Signature of Committee Chairperson

318-221-8646
Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
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Form 200, Rev. 3/98