COMMITTEE'S REPORT

(to be filed by committees that support or oppose more than one candidate and/or proposition)

1. Full Name and Address of Political Committee

LOUISIANA SURPLUS LINE ASSOCIATION
POLITICAL ACTION COMMITTEE

P. O. BOX 446

MANDEVILLE, LA 70470

OFFICE USE ONLY

Pac 90-P 10/99 1/31

560

2. Date of Primary _____

This report covers from 1/1/99 through 12/31/99

3. Type of Report:

Same report as 565

____ 180th day prior to primary
____ 90th day prior to primary
____ 30th day prior to primary
____ 10th day prior to primary
____ 10th day prior to general
____ 40th day after general
XXX Annual
____ Amendment to prior report

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

a. Name	b. Position	c. Address
ROSEMARY DELOUISE	Chairperson / Treasurer	P. O. BOX 446 MANDEVILLE, LA 70470

5. Candidates or Propositions the Committee is Supporting or Opposing (use additional sheets if necessary)

a. Name & Address of Candidate/Description of Proposition	b. Office Sought	c. Political Party	d. Support/Oppose
N/A			

6. Is the Committee supporting the entire ticket of a political party? ____ Yes XXX No If "yes", which party?

7. a. Name of Person Preparing Report
SAL MARINO

b. Daytime Telephone (504) 792-4798

8. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 31st day of January 2000

Rose Mary De Louise
Signature of Committee/Chairperson

(504) 792-4798
Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

Form 202, Rev. 3/98, Page Rev. 3/98