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
10-P 10/99
1/31

J-562

2. Date of Primary _____

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

3. Type of Report:

____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

Same report as 565

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

Rosemary DeLouise
Signature of Committee Chairperson

(504) 792-4798
Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

2000 FEB 1 PM 2:51

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