STATEMENT OF ORGANIZATION

OFFICE USE ONLY

S/O 1/11

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Rec # 496667
#1043

1. Name and Address of Committee

LOUISIANA SURPLUS LINE ASSOCIATION
POLITICAL ACTION COMMITTEE

P. O. BOX 73609

METAIRIE, LA 70033

Check if new committee ____

2. Date of this Statement

JAN.11, 1999

3. Estimated Membership

100

4. Amended Statement?

____Yes ____No

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

Position	Name	Address
Chairperson / Treasurer	ROSEMARY DELOUISE	P. O. BOX 73609 METAIRIE, LA 70033

6. Affiliated Organizations
(Any organization, other than a political committee, which directly or indirectly established, administers or financially supports this committee.)

Name	Address	Relationship to Committee
LOUISIANA SURPLUS LINE ASSOCIATION	P. O. BOX 73609 METAIRIE, LA 70033	ESTABLISHED THE COMMITTEE

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions)

Name	Address
FIRST NATIONAL BANK OF COMMERCE	210 BARONNE STREET NEW ORLEANS, LA 70112

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

b. Name of Candidate: N/A

c. Office Sought by the Candidate: N/A

9. Name of Person Preparing Report SAL MARINO **Daytime Telephone** (504) 468-8461

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 11th day of JANUARY, 19 99.

Rose Mary De Louise
Signature of Committee Chairperson

(504) 468-8461
Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number

Form 200, Rev. 3/91