STATEMENT OF ORGANIZATION

OFFICE USE ONLY 99

S/O 4/10

99 APR 12 PM 4:

LOUISIANA ETHICS ADMINISTRATION CAMPAIGN FINANCE

992039

1. Name and Address of Committee
Citizens for Bossier Medical Center
2302 Arlington Pl.
Bossier City
Louisiana, 71111

Check if new committee ✓

2. Date of this Statement
4-9-99

3. Estimated Membership
8

4. Amended Statement?
___Yes ___No

Rec. # 318298
#1005

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

Position	Name	Address
Chairperson	No CHAIRMAN - has resigned	
Treasurer	C. H. McCuller M.D.	2302 Arlington Pl., Bossier City, La., 71111

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

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

Name	Address
Bossier Federal Credit Union	P.O. Box 5635 Bossier City Louisiana, 71171-5635

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. Name of Person Preparing Report C. H. McCuller M.D. Daytime Telephone 318-746-2189

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 9th day of April, 1999

Signature of Committee Chairperson

Daytime Telephone Number

C H McCuller MD

Signature of Committee Treasurer, if any

318-746-2189

Daytime Telephone Number

Form 900, Rev. 3/91