| STATEMENT OF ORGANIZATION | | OFFICE USE ONLY Report Number: 10985 |
|---|---|---|
| Name and Address of Committee | 2. Date of this Statement | Date Filed: 1/25/2007 |
| ABC MERIT PAC | 1/25/2007 | Report Number: 10985 Date Filed: 1/25/2007 |
| 101 Riverbend Dr. St. Rose, LA 70087 | 3. Estimated Membership | |
| | 220 | |
| Check If: | 4. Amended Statement? | |
| New Committee | YesX_No | |
| All Committee Officers and Directors (including Chairperson, Treasu a. <u>Name</u> b. <u>Position</u> | rer, if any, and any other committee c | officers and directors) |
| Chairpersor | 1 | |
| GEORGE RINALDI Treasurer | 101 Riverbend Dr. | |
| | St. Rose, LA 70087 | |
| Affiliated Organizations (Any organization, other than a political committee, which directly or | indirectly established, administers, or | financially supports this committee.) |
| a. <u>Name</u> b. <u>Address</u> | | c. Relationship to Committee |
| On attached sheet | | |
| All Depositories for Committee Funds (committee funds must be dep mutual funds.) | posited in one or more banks or saving | gs and loan institutions or money market |
| a. <u>Name</u> b. <u>Address</u> | | |
| On attached sheet | | |
| 8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: | a. Check one: Principal | Campaign Committee Subsidiary Committee |
| b. Name of Candidate | c. C | Office Sought by the Candidate |
| 9. a. Name of Person Preparing Report PAMELA FLEET b. Daytime Telephone (504)468-3188 | WOOD | |
| 10. WE HEREBY CERTIFY that the information contained in this STAT information and belief. | EMENT OF ORGANIZATION is true a | and correct to the best of our knowledge , |
| This 25th day of January , 20 | 007 | |
| Dana Stumpf Signature of Committee/Chairperson | | (504)468-3188 Daytime Telephone |
| George Rinaldi Signature of Committee Treasurer, if any | <u></u> | (504)468-3188 Daytime Telephone |

Form 200, Rev. 12/03

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

NEW ORLEANS BAYOU CHAPTER ABC

Affiliated Organization

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. <u>Name</u>

b. Address

AMSOUTH

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