

STATEMENT OF ORGANIZATION		OFFICE USE ONLY										
1. Name and Address of Committee ABC MERIT PAC 101 Riverbend Dr. St. Rose, LA 70087 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/8/2004</div>	Report Number: 6366 Date Filed: 1/8/2004 										
	3. Estimated Membership <div style="text-align: center;">180</div>											
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>											
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 34%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>PHILIP REBOWE</td> <td>Chairperson</td> <td>101 Riverbend Dr. St. Rose, LA 70087</td> </tr> <tr> <td>GEORGE RINALDI</td> <td>Treasurer</td> <td>101 Riverbend Dr. St. Rose, LA 70087</td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	PHILIP REBOWE	Chairperson	101 Riverbend Dr. St. Rose, LA 70087	GEORGE RINALDI	Treasurer	101 Riverbend Dr. St. Rose, LA 70087
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PHILIP REBOWE	Chairperson	101 Riverbend Dr. St. Rose, LA 70087										
GEORGE RINALDI	Treasurer	101 Riverbend Dr. St. Rose, LA 70087										
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> <th style="text-align: left; width: 34%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3" style="height: 40px;"></td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
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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.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2" style="height: 40px; vertical-align: bottom;">On attached sheet</td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Address</u>	On attached sheet						
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee												
b. Name of Candidate <div style="height: 60px;"></div>		c. Office Sought by the Candidate <div style="height: 60px;"></div>										
9. a. Name of Person Preparing Report PAMELA FLEETWOOD b. Daytime Telephone (504)468-3188												
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 <u>8th</u> day of <u>January</u> , <u>2004</u> . <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: bottom; padding-top: 20px;"> <u>Philip Rebowe</u> Signature of Committee/Chairperson </td> <td style="width: 50%; vertical-align: bottom; padding-top: 20px;"> <u>(504)468-3188</u> Daytime Telephone </td> </tr> <tr> <td style="vertical-align: bottom; padding-top: 20px;"> <u>George Rinaldi</u> Signature of Committee Treasurer, if any </td> <td style="vertical-align: bottom; padding-top: 20px;"> <u>(504)468-3188</u> Daytime Telephone </td> </tr> </table>				<u>Philip Rebowe</u> Signature of Committee/Chairperson	<u>(504)468-3188</u> Daytime Telephone	<u>George Rinaldi</u> Signature of Committee Treasurer, if any	<u>(504)468-3188</u> Daytime Telephone					
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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. Name

NEW ORLEANS BAYOU
CHAPTER ASSOCIATED
BUILDERS

b. Address

101 Riverbend Dr.
St. Rose, LA 70087