

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee LOUISIANA ASSOCIATION OF HEALTH UNDERWRITERS PAC CORPORATION 8550 United Plaza Boulevard Suite 1001 Baton Rouge, LA 70809 Check If: New Committee _____	2. Date of this Statement 1/17/2020	Report Number: 85408 Date Filed: 1/17/2020 									
	3. Estimated Membership 25										
	4. Amended Statement? ☐ Yes ☒ No										
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>JACK DUVERNAY</td> <td>Chairperson</td> <td>714 Millikens Bend Covington, LA 70433</td> </tr> <tr> <td>RON NEZAT</td> <td>Treasurer</td> <td>PO Box 91180 Lafayette, LA 70509</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	JACK DUVERNAY	Chairperson	714 Millikens Bend Covington, LA 70433	RON NEZAT	Treasurer	PO Box 91180 Lafayette, LA 70509
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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">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>	On attached sheet					
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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">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: ☐ Principal Campaign Committee ☐ Subsidiary Committee											
b. Name of Candidate		c. Office Sought by the Candidate									
9. a. Name of Person Preparing Report H. BLAND O'CONNOR b. Daytime Telephone 225-922-4619											
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 17th day of January , 2020 . <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>Jack Duvernay</u> Signature of Committee/Chairperson </td> <td style="width: 50%; vertical-align: top;"> <u>504-500-1065</u> Daytime Telephone </td> </tr> <tr> <td style="vertical-align: top;"> <u>Ron Nezat</u> Signature of Committee Treasurer, if any </td> <td style="vertical-align: top;"> <u>337-896-9982</u> Daytime Telephone </td> </tr> </table>			<u>Jack Duvernay</u> Signature of Committee/Chairperson	<u>504-500-1065</u> Daytime Telephone	<u>Ron Nezat</u> Signature of Committee Treasurer, if any	<u>337-896-9982</u> Daytime Telephone					
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a. Name

b. Address

c. Relationship to Committee

LOUISIANA ASSOCIATION OF
HEALTH UNDERWRITERS

401 E. Butcher Road
Lafayette, LA 70507

Professional Association

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a. Name

b. Address

CHASE BANK

PO Box 182051
Columbus, OH 43218