STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1/3

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1. Name and Address of Committee
Physical Therapist Political Action Committee
9550 United Plaza Blvd.
Suite 1001
Baton Rouge LA 70809

Check if new committee ____

2. Date of this Statement
01/18/2010

3. Estimated Membership
80

4. Amended Statement?
____Yes X No

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

Position	Name	Address
Chairperson		
Treasurer		

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Please see attached sheets.

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

Name	Address	Relationship to Committee

Please see attached sheets.

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

Name	Address

Please see attached sheets.

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

Please see attached sheets.

9. Name of Person Preparing Report — Daytime Telephone — Please see attached sheets.

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.

Dated 01/18/2010

Oday J. Laurence
Signature of Committee Chairperson

318/484-9165
Daytime Telephone Number

Karl Klaipeter
Signature of Committee Treasurer, if any

225/658-7751
Daytime Telephone Number

Form 2SO, Rev 3/98

HAND DELIVERED

Affiliated Persons / Organizations

Name and Address of Treasurer Kari Kleinpeter 331 Sandy Springs Lane Jackson LA 70748-4345 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Chair Person Oday Lavergne 3505 Bayou Rapides Alexandria LA 71303 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm:
Name and Address of Person Preparing Report H. Bland O'Connor 8550 United Plaza Blvd Suite 1001 Baton Rouge LA 70809 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer): 225/922-4600	Rel of Aff. Org. to Comm:
Name and Address of Louisiana Physical Therapy Association 8550 United Plaza Blvd. Suite 1001 Baton Rouge LA 70809 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: Professional Association
Name and Address of Financial Institution Capital One 6920 Bluebonnet Blvd Baton Rouge LA 70810 Chairperson:	Candidate Information Office Sought (include title of office as well as parish, city, town and/or election district) Name of Political Party: ☐ SUPPORTED ☐ OPPOSED by the Committee
Daytime Telephone (Preparer):	Rel of Aff. Org. to Comm: