STATEMENT OF ORGANIZATION

OFFICE USE ONLY

Report Number: 21722

Date Filed: 1/7/2011

11000150

1. Name and Address of Committee

LOUISIANA NURSING HOME POLITICAL ACTION COMMI
7844 Office Park Blvd
Baton Rouge, LA 70809

Check if:
New Committee _____ Monthly Filer _____

2. Date of this Statement: 1/15/2011

3. Estimated Membership: 200

4. Amended Statement? ___ Yes X No

PAC
S/O
R#8463
C#4164

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

a. Name	b. Position	c. Address
RONALD A GOUX	Chairperson	P.O. Box 1429 Mandeville, LA 70470-1429
PHYLLIS CHATELAIN	Treasurer	P.O. Drawer 320 New Roads, LA 70760

Additional officers listed on attached sheet

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

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 b. Address

On attached sheet

This report was electronically filed. Go to electronically filed reports to view.

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

7. a. Name of Person Preparing Report MARK BERGER

b. Daytime Telephone 225-927-5642

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 15th day of January, 2011.

Ronald A. Goux
Signature of Committee/Chairperson

985-626-1900
Daytime Telephone

Phyllis Chatelain
Signature of Committee Treasurer, if any

225-638-4404
Daytime Telephone

Form 200, Rev. 12/03