

STATEMENT OF ORGANIZATION

OFFICE USE ONLY 1/3

1. Name and Address of Committee

Louisiana Veterinary Medical Association Poli
 8550 United Plaza Blvd.
 Suite 1001
 Baton Rouge LA 70809

2. Date of this Statement
 01/23/2014

3. Estimated Membership
 100

4. Amended Statement?

Yes No

*PAC
 S/O
 1/31
 Rec # 86405
 # 2684*

14001038

Check if new committee

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

Position	Name	Address
Chairperson		
Treasurer		

Please see attached sheets.

6. 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
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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
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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 01/23/2014

Dr. Alfred Stevens

Signature of Committee Chairperson

Alfred H. Stevens, DVM

Signature of Committee Treasurer, if any

225-293-6440

Daytime Telephone Number

Daytime Telephone Number

HAND DELIVERED

2014 MAR 31 AM 11:18
 RECEIVED
 OFFICE OF THE ATTORNEY GENERAL

Affiliated Persons / Organizations

<p>Name and Address of Chair Person Alfred G. Stevens 3803 S. Sherwood Forest Blvd. Baton Rouge LA 70816 Chairperson:</p>	<p>Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p>Daytime Telephone (Preparer):</p>	<p>Rel of Aff. Org. to Comm:</p>
<p>Name and Address of Person Preparing Report H. Bland O'Connor 8550 United Plaza Blvd. Suite 1001 Baton Rouge LA 70809 Chairperson:</p>	<p>Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p>Daytime Telephone (Preparer): 225/928-5862</p>	<p>Rel of Aff. Org. to Comm:</p>
<p>Name and Address of Louisiana Veterinary Medical Assn. 8550 United Plaza Blvd. Suite 1001 Baton Rouge LA 70809 Chairperson:</p>	<p>Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p>Daytime Telephone (Preparer):</p>	<p>Rel of Aff. Org. to Comm: professional organization</p>
<p>Name and Address of Financial Institution Whitney National Bank 3617 S. Sherwood Forest Blvd Baton Rouge LA 70816 Chairperson:</p>	<p>Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p>Daytime Telephone (Preparer):</p>	<p>Rel of Aff. Org. to Comm:</p>

<p>Name and Address of [Empty] Baton Rouge LA [Empty] Chairperson:</p>	<p>Candidate Information Office Sought (Include title of office as well as parish, city, town and/or election district) Name of Political Party: <input type="checkbox"/> SUPPORTED <input type="checkbox"/> OPPOSED by the Committee</p>
<p>Daytime Telephone (Preparer):</p>	<p>Rel of Aff. Org. to Comm:</p>