ATTACKET OF OR	OFFIC	OFFICE USE ONLY 1/3	
STATEMENT OF OR	<u> </u>		i i
. Name and Address of Committee	2. Date of this Statement 01/14/2009	PAC = 5/0	09
ALARIO PAC 1083 MULLER PARKWAY	,	15/0	091.0147
	0094-5416 3. Estimated Membership	1/15	0
WESTWEGD LA 70	10	1115	<u>-</u>
		A 40001	~4
	4. Amended Statement?	* 135B	.
Check if pay committee	Yes <u>XN</u> o	# 1358	<u></u>
6. All Committee Officers and Directors (including Chairperson	, Treesurer, If any, and any other committee	officers and directors)	
Ppattion Name	Address		
Chelrperson			·
Tressurer			ļ
	<u> </u>	<u> </u>	Pieese sas attached shoots.
<ol> <li>Affiliated Organizations         (Any organization, other than a political committee, which     </li> </ol>	directly or indirectly established, administrat	tore or financially supports th	is committee.)
Name Address Retrievable to Committee			with p to Committee
			Please see attached sheets.
2. All Depositories for Committee Funds (committee funds mu	usi he depositud in one or mont banks or sav	ings and loop institutions)	
Name	Arichment		
			Please sas attached sheets.
8, IF THIS COMMITTEE SUPPORTS A SINGLE CAND	DIDATE: a. Check one: Principa	i Cumpsign Committee	Subsidiary Committee
b. Name of Candidate	c. Office Sought by the Co	endidate	
			Piggge see attached sheets.
		Daysime Talephone	Please see attached sheets.
Name of Person Preparing Report  10. WE HEREBY CERTIFY that the information contained	A STATEMENT OF ORGANIZATE	· -	best of our knowledge, information
10, WE HEREBY CERTIFY that the information contains and belief.	pinning STATEMENT OF SKINNING	•••	
Dated 01/17/2008 . 01/1 /			
POUNTAL ADDIO 18		504-340-2221	
JOHN ALARIO, JR Signature of Committee Chairm Son	· · · · · · · · · · · · · · · · · · ·	Daytime Telephone Nur	nber .
l U			
Signature of Committe Treasurer, If pmy		Daytime Telephone Nur	mber
Segnption of Committee 170 action; in page			

## COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee. Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members as of December 31 of the calendar year immediately preceding the date date of this STATEMENT OF ORGANIZATION. We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee during the calendar year immediately preceding the date of this Statement of Organization.

Dated	
Signature of Committee Chairperson	
Signature of Committee Insaturer, if any	

## INSTRUCTIONS FOR COMPLETION OF STATEMENT OF ORGANIZATION

- A \$100 filling fee must accompany this form. The fee should be paid with a committee check payable to 'Campaign' Finance."
- 2. This form must be filed every year between January 1 and January 31, subject to the following exceptions: -if a committee organizes after January 31, then this form must be filed within 10 days of the date of organization.
  - -if the committee organizes within 10 days prior to an election, then this form must be filed within 3 days of the date of
  - -if the committee does not anticipate that it will have over \$500 in total financial activity for a particular calendar year, it is not required to file this form for that year, if it determines later in that year that it will exceed \$500 in total financial activity then this form must then be filed within 10 days.
- Committee names must comply with the following rules:
  - The name cannot be the same as or deceptively similar to the name of another political committee.
  - -if the committee supports only one candidate, the committee name must contain the name of that candidate. -if the committee supports more than one candidate, the committee name cannot contain the name of an individual unless
  - the committee name clearly reflects that the committee is not supporting or opposing only that individual. -if the committee uses an acronym in addition to its complete name, place the acronym in parentheses after the complete
  - -if the committee name contains a number, spell out the number in the name and place the numerical symbol(s) in
  - parentheses.
- 4. Items 1-7 on the form must be completed. If the committee has no affiliated organization, then item 6 should be marked Not Applicable(N/A), Items 9 and 10 must also be completed.
- 5. Item 8 should be completed only if this committee supports a single candidate. If this item is completed, there must be a Statement of Designation completed by the candidate or his principal campaign committee already on file with this office or accompanying this form.
- 6. Any change in this information reported on this form that occurs before the committee's next Statement of Organization is otherwise due must be reported by filing an Amended Statement of Organization within 10 days following the change. No filling fee is required for the filling of such an amendment.
- A Certificate of Registration will be issued to each properly organized committee.
- 8. A committee that has over \$500 of financial activity in a calendar year and does not file a Statement of Organization is LOUISIANA BOARD OF ETHICS subject to fines.
- 9. Mail or hand deliver to:

SUFFE 200 8401 UNITED PLAZA BLVD. BATON ROUGE, LA 70809

Affiliated Persons / Organizations	3/3
Name and Address of Chair Person Mr JOHN ALARIO JR 1063 MULUER PARKYYAY	Candidate Information Office Sought (include title of office on well as parties, City, lover sendor election district)
WESTWEGO LA 70094	
	Name of Political Party:
Chairperson:	SUPPORTED DPPOSED by the Committee
Daytima Telephone (Praparar):	Rel of Art. Org. to Commit: CHAIRMAN JOHN ALARIO JR 1063 MULLER PARI
Name and Address of CAPITAL ONE BANK	Candidate Information Office Sought (Include title of office as well as partial, day, town and/or election district)
	Name of Political Party:
Chairperisth:	SUPPORTED OPPOSED by the Committee
Daytima Telephone (Properer):	Rel of Aff. Org. to Comm:
Name and Address of Person Preparing Report  JOHN ALARIO JR  1083 MULLER PARKWAY	Candidate Information Office Sought (Include title of office as well as parish, city, town ender election district)
WESTWEGD LA 76094-5415	
	Name of Political Party:
Chairperson:	SUPPORTED OPPOSED by the Committee
Daytime Yelephone (Preparer): 504-340-2221	Rail of Aff. Org. to Comm: