| STATEMENT OF ORGANIZATION | | OFFICE USE ONLY Report Number: 28841 |
|---|---------------------------------|--|
| Name and Address of Committee | 2. Date of this Statement | Report Number: 28841 Date Filed: 1/7/2012 |
| ALARIO PAC | 1/25/20 | 11 Bate 1 lieu. 1/7/2012 |
| 1063 MULLER PARKWAY WESTWEGO, LA 70094-5416 | | Report Number: 28841 Date Filed: 1/7/2012 |
| | 3. Estimated Membership | |
| | | 10 |
| Check If: | 4. Amended Statement? | |
| New Committee | YesX^ | lo |
| 5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. <u>Name</u> b. <u>Position</u> c. <u>Address</u> | | |
| MR JOHN ALARIO JR Chairperson | 1063 MULLER | PARKWAY |
| | WESTWEGO, L | A 70094 |
| Treasurer | | |
| | | |
| 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) | | |
| a. <u>Name</u> b. <u>Address</u> | • | c. Relationship to Committee |
| On attached sheet | | |
| 7. All Depositories for Committee Funds (committee funds must be depositual funds.) | sited in one or more banks or s | avings and loan institutions or money market |
| a. <u>Name</u> b. <u>Address</u> | | |
| 8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: | a. Check one: Princ | ipal Campaign Committee Subsidiary Committee |
| b. Name of Candidate | | c. Office Sought by the Candidate |
| | | |
| 9. a. Name of Person Preparing Report JOHN ALARIO JR b. Daytime Telephone 504-340-2221 | | |
| 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 7th day of January , 201 | 2 | |
| JOHN ALARIO JR Signature of Committee/Chairperson | | 504-340-2221 Daytime Telephone |
| | | |

Form 200, Rev. 12/03

Signature of Committee Treasurer, if any

Daytime Telephone

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

CAPITAL ONE BANK

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