

| STATEMENT OF ORGANIZATION | | OFFICE USE ONLY | | | | | | | | | |
|--|--|---|---|-----------------------|---|-----------------------|-------------|------|------------------|-----------|---|
| <p>1. Name and Address of Committee</p> <p>LEADERSHIP FOR LOUISIANA 106 Treehaven Boulevard Lafayette, LA 70506</p> <p>Check If: New Committee _____</p> | <p>2. Date of this Statement</p> <p style="text-align: center;">1/30/2013</p> <p>3. Estimated Membership</p> <p style="text-align: center;">0</p> <p>4. Amended Statement?</p> <p style="text-align: center;">_____ Yes <u> X </u> No</p> | <p>Report Number: 34438</p> <p>Date Filed: 1/31/2013</p> | | | | | | | | | |
| <p>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">a. Name</th> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">b. Position</th> <th style="width: 40%; text-align: left; border-bottom: 1px solid black;">c. Address</th> </tr> </thead> <tbody> <tr> <td>MICHAEL MICHOT</td> <td>Chairperson</td> <td>, LA</td> </tr> <tr> <td>JOEL C ROBIDEAUX</td> <td>Treasurer</td> <td>106 Treehaven Blvd same address for chairperson Lafayette, LA 70503</td> </tr> </tbody> </table> | | | a. Name | b. Position | c. Address | MICHAEL MICHOT | Chairperson | , LA | JOEL C ROBIDEAUX | Treasurer | 106 Treehaven Blvd same address for chairperson Lafayette, LA 70503 |
| a. Name | b. Position | c. Address | | | | | | | | | |
| MICHAEL MICHOT | Chairperson | , LA | | | | | | | | | |
| JOEL C ROBIDEAUX | Treasurer | 106 Treehaven Blvd same address for chairperson Lafayette, LA 70503 | | | | | | | | | |
| <p>6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">a. Name</th> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">b. Address</th> <th style="width: 40%; text-align: left; border-bottom: 1px solid black;">c. Relationship to Committee</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table> | | | a. Name | b. Address | c. Relationship to Committee | | | | | | |
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| | | | | | | | | | | | |
| <p>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.)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; border-bottom: 1px solid black;">a. Name</th> <th style="width: 70%; text-align: left; border-bottom: 1px solid black;">b. Address</th> </tr> </thead> <tbody> <tr> <td>On attached sheet</td> <td> </td> </tr> </tbody> </table> | | | a. Name | b. Address | On attached sheet | | | | | | |
| a. Name | b. Address | | | | | | | | | | |
| On attached sheet | | | | | | | | | | | |
| <p>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: _____ Principal Campaign Committee <u> X </u> Subsidiary Committee</p> | | | | | | | | | | | |
| <p>b. Name of Candidate</p> | <p>c. Office Sought by the Candidate</p> | | | | | | | | | | |
| <p>9. a. Name of Person Preparing Report JOEL C ROBIDEAUX COMMITTEE TREASURER</p> <p>b. Daytime Telephone (337)981-5555</p> | | | | | | | | | | | |
| <p>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.</p> <p>This <u> 31st </u> day of <u> January </u>, <u> 2013 </u>.</p> <table style="width: 100%; margin-top: 20px;"> <tr> <td style="width: 60%; padding-bottom: 10px;"> <u>Michael Michot</u> Signature of Committee/Chairperson </td> <td style="width: 40%; padding-bottom: 10px;"> Daytime Telephone </td> </tr> <tr> <td style="padding-bottom: 10px;"> <u>Joel C Robideaux</u> Signature of Committee Treasurer, if any </td> <td style="padding-bottom: 10px;"> Daytime Telephone </td> </tr> </table> | | | <u>Michael Michot</u> Signature of Committee/Chairperson | Daytime Telephone | <u>Joel C Robideaux</u> Signature of Committee Treasurer, if any | Daytime Telephone | | | | | |
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| <u>Joel C Robideaux</u> Signature of Committee Treasurer, if any | Daytime Telephone | | | | | | | | | | |

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

MIDSOUTH BANK

b. Address

P O Box 3745
Lafayette, LA 70502