



## 5. TYPE OF COMMITTEE (Check One)

**Candidate Committee:**

(a)  This committee is a principal campaign committee. (Complete the candidate information below.)

(b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought:

House

Senate

President

State  
District
  


(c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

(d)  This committee is a  (National, State  
(or subordinate) committee of the  (Democratic,  
Republican,etc.) Party.

**Political Action Committee (PAC):**

(e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation  Corporation w/o Capital Stock  Labor Organization

Membership Organization  Trade Association  Cooperative

(f)  In addition, this committee is a Lobbyist/Registrant PAC.

This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

(g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

## Committees Participating in Joint Fundraiser

1.

2.

3.

4.

FEC ID number

C	<input type="text"/>

Write or Type Committee Name

**Melancon Victory 2010****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor****Democratic State Central Committee of LA**

Mailing Address

**Post Office Box 4385****Baton Rouge****LA****70821****CITY▲****STATE▲****ZIP CODE ▲**

Relationship:

Connected Organization     Affiliated Committee     Joint Fundraising Representative     Leadership PAC Sponsor

**7. Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

**Mary C. Hoffman**

Mailing Address

**12539 E. Sheraton Ave.****Baton Rouge****LA****70815**

Title or Position ▼

**CITY▲****STATE▲****ZIP CODE ▲****Custodian of Records**

Telephone number

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer**Mary C. Hoffman**

Mailing Address

**12539 E. Sheraton Ave.****Baton Rouge****LA****70815**

Title or Position ▼

**CITY▲****STATE▲****ZIP CODE ▲****Treasurer**

Telephone number

Full Name of  
Designated  
Agent \_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Whitney National Bank

445 North Blvd.

Mailing Address

LA

70802

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

\_\_\_\_\_

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

