



Louisiana Pro-Life Voters

Political Action Committee

"The only thing necessary for the triumph of evil is for good men to do nothing."

-Edmund Burke

April 29, 1996

✓ Public Records Office
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Elections Division
Office of the Secretary of State
P.O. Box 94125
Baton Rouge, LA 70804-9125

MAY 3 9 16 AM '96

FEDERAL ELECTION
COMMISSION
MAY 3 1996

To Whom it May Concern:

Enclosed please find a copy of the Statement of Organization for "Louisiana Pro-Life Voters Political Action Committee" (LPVP).

Thanking you for your assistance, I remain,

Yours truly,


Dorinda C. Bordlee
Treasurer, LPVP

DCB/mr

Encl.

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STATEMENT OF ORGANIZATION

(See reverse side for instructions)

FEDERAL ELECTION COMMISSION
DO NOT WRITE IN THESE SPACES

Mar 3 9 18 AM '96

1. (a) NAME OF COMMITTEE IN FULL Louisiana Pro-Life Voters Political Action Committee (LPVP)	☐ (Check if name is changed)	2. DATE Feb. 10, 1996
(b) Number and Street Address 3422 Cleary Avenue, Suite E	☐ (Check if address is changed)	3. FEC Identification Number
(c) City, State and ZIP Code Metairie, La. 70002		4. Is This Report An Amendment? ☐ YES ☒ NO

5. TYPE OF COMMITTEE (Check one)

- ☐ (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 | State/District |
|-------------------|-----------------------------|---------------|----------------|
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☒ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
none		

Type of Connected Organization

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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	Mailing Address	Title or Position
Dorinda C. Bordlee	P.O. Box 8303, Metairie, La 70011	Treasurer, LPVP

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	Mailing Address	Title or Position
Treas - Dorinda C. Bordlee	P.O. Box 8303 Metairie, La 70011	Treasurer
Timothy S. Madden	201 St. Charles Ave, Ste. 3800, New Orleans, La. 70110	Asst. Treas.

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.	Mailing Address and ZIP Code
Omni Bank	51900 Ridgeway Dr. Metairie, LA 70002

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Dorinda C. Bordlee	SIGNATURE OF TREASURER <i>Dorinda C. Bordlee</i>	DATE 4/10/96
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9630
Local 202-219-3420

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FEC FORM 1
(revised 4/87)

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	DATE OF RECEIPT
☒ First Class Mail	POSTMARKED 4-30-96
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☐ No Postmark	
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☐ Received from the Senate Office of Public Records	DATE OF RECEIPT
☐ Other (Specify):	POSTMARKED and/or DATE OF RECEIPT
 PREPARER 5-3-96 DATE PREPARED	