

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL Political Action Committee for the Mississippi Employees of Entergy Mississippi, Inc., Entergy Services, Inc., Entergy Enterprises, Inc., and Entergy Integrated Solutions, Inc., Subsidiaries of Entergy Corporation (ENPAC-Mississippi)	2. DATE 12/28/00 RECEIVED FEC MAIL ROOM DEC 28 4 45
(b) Number and Street Address P.O. Box 1640	3. FEC Identification Number C00100347
(c) City, State and ZIP Code Jackson, MS 39215-1640	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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
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(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) (Democrat, 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
**See Attachment**		

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

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

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

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 Carey J. McCoy	SIGNATURE OF TREASURER <i>Carey J. McCoy</i>	DATE 12/28/00
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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.

Political Action Committee for the Mississippi Employees of Entergy Mississippi, Inc., Entergy Services, Inc., Entergy Enterprises, Inc., and Entergy Integrated Solutions, Inc., Subsidiaries of Entergy Corporation (ENPAC-Mississippi)

C00100347

FEC Statement of Organization Amendment

Add the following Affiliated PAC

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Entergy Corporation Political Action Committee (ENPAC) C00363879	1776 I Street N.W. #275 Washington, DC 20006	Affiliated

