STATEMENT OF ORGANIZATION		OFFICE USE ONLY Report Number: 17742
Name and Address of Committee	2. Date of this Statement	Date Filed: 1/6/2010
LOUISIANA ACADEMY OF MEDICAL PSYCHOLOGISTS 101 Park Rowe Avenue Ste. 200 Baton Rouge, LA 70810	1/6/2010	Report Number: 17742 Date Filed: 1/6/2010
	3. Estimated Membership	■
	30	
Check If:	4. Amended Statement?	
New Committee	YesX_No	
All Committee Officers and Directors (including Chairperson, Treasure a. <u>Name</u> b. <u>Position</u>	er, if any, and any other committee c. <u>Address</u>	officers and directors)
DR. ROBERT DAVIS, PHD MP Chairperson	740 Colonial Drive	
	Baton Rouge, LA 7	0806
DR. JOHN BOLTER, PHD MP Treasurer 101 Park Rowe Avenue Ste. 200 Baton Rouge, LA 70810		
Affiliated Organizations (Any organization, other than a political committee, which directly or in	directly established, administers, o	r financially supports this committee.)
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
All Depositories for Committee Funds (committee funds must be depo mutual funds.)	sited in one or more banks or savin	gs and loan institutions or money market
a. <u>Name</u> b. <u>Address</u>		
On attached sheet		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:	a. Check one: Principal	Campaign Committee Subsidiary Committee
b. Name of Candidate	с. (Office Sought by the Candidate
9. a. Name of Person Preparing Report GAY COURSON		
b. Daytime Telephone		
10. WE HEREBY CERTIFY that the information contained in this STATE information and belief.	MENT OF ORGANIZATION is true	and correct to the best of our knowledge ,
This 6th day of January , 201	10 .	
Dr. Robert Davis PhD MP		225-216-9422
Signature of Committee/Chairperson		Daytime Telephone
Dr. John Bolter PhD MP		225-769-2200
Signature of Committee Treasurer, if any		Daytime Telephone

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- 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 b. Address

REGIONS BANK

Alexandria, LA

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