STATEMENT OF ORGANIZATION			OFFICE USE ONLY		
	<b>,</b>		Report Number: 1	18183	
Name and Address of Committee  ST. CEORCE DAC	2. Date of	this Statement 1/18/2024	<b>Date Filed:</b> 1/18/202	24	
ST. GEORGE PAC 13421 Ridgeview Drive Baton Rouge, LA 70817	3. Estimate	ed Membership		18183	
	4. Amende	ed Statement?			
Check If: New Committee	Y	res X No			
All Committee Officers and Directors (including Chairperson a. Name     b. Pos	-	-	fficers and directors)		
CLAY LEGRANDE, JR Chairperson 13421 RIDGEVIEW DR, , BATON ROUGE, LA 70817					
Tr	easurer				
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)					
a. <u>Name</u> b. <u>Address</u>	Name b. Address c. Relationship to Committee				
All Depositories for Committee Funds (committee funds mutual funds.)	ust be deposited in one or	more banks or saving	s and loan institutions or money m	arket	
a. <u>Name</u> b. <u>Address</u>					
8. Type of Committee					
IF THE POLITICAL COMMITTEE SUPPORTS ONLY <b>ON</b> By my signature below, I hereby certify that this co	<del>-</del>				
By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a.					
By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that the committee is not working, and will not work, in coordination, consultation, or cooperation with the candidate referenced in 8a.					
By my signature below, I hereby certify that this committee is organized solely to make independent expenditures and is not, and will not, make contributions (direct or in-kind as defined in R.S. 18:1483(6), in contravention of the Campaign Finance Disclosure Act.					
IF THE POLITICAL COMMITTEE SUPPORTS <b>MULTIPLE</b> X  By my signature below, I hereby certify that this contributions (direct or in-kind as defined in R.S. 1	ommittee is organized sol	ely to make independe	ent expenditures and is not, and wil	ll not, make	
8a. Name of Candidate		8b. (	Office Sought by the Candidate		
9. a. Name of Person Preparing Report: LEIGH H DAVIS			b. Daytime Telephone:	225-766-6966	
10. WE HEREBY CERTIFY that the information contained in information and belief.	this STATEMENT OF OR	GANIZATION is true a	and correct to the best of our knowledge	edge ,	
This 18th day of January	. 2024 .				
CLAY LEGRANDE JR 22	25-772-7381				
	aytime Telephone	Signature of Com	ımittee Treasurer, if any	Daytime Telephone	

Form 200, Rev. 12/03, Page Rev. 6/2023