| STATEMENT OF ORGANIZATION | | OFFICE USE ONLY |
|---|-----------------------------|--|
| 4. Name and Address of Committee | 2 Data afabia Statemant | Report Number: 70720 Date Filed: 6/6/2018 |
| Name and Address of Committee | 2. Date of this Statement | Date Filed: 6/6/2018 |
| STAND FOR CHILDREN LOUISIANA PAC 601 Laurel St | 6/6/2018 | |
| Baton Rouge, LA 70802 | 3. Estimated Membership | = |
| | | |
| | 4. Amended Statement? | - |
| Check If: New Committee | X Yes No | |
| | <u> </u> | |
| 5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name b. Position c. Address | | |
| CARRIE GRIFFIN MONICA Chairperson | 601 Laurel St | |
| | Baton Rouge, LA | 70802 |
| KEITH LEGER, TREASURER [^] Treasurer 601 Laurel St | | |
| Baton Rouge, LA 70802 | | |
| Additional officers listed on attached sheet | | |
| 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address c. Relationship to Committee | | |
| On attached sheet | | · |
| 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. <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 RYAN BROWN | | |
| b. Daytime Telephone 971-271-5962 | | |
| 10. WE HEREBY CERTIFY that the information contained in this STATE information and belief. | MENT OF ORGANIZATION is tru | e and correct to the best of our knowledge , |
| This 6th day of June , 20 | 18 | |
| | | |
| Carrie Griffin Monica | | 503-235-2305 |
| Signature of Committee/Chairperson | | Daytime Telephone |
| Keith Leger | | 503-235-2305 |
| Signature of Committee Treasurer, if any | | Daytime Telephone |

Form 200, Rev. 12/03

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name b. Position c. Address

CEO JONAH EDELMAN Officer 2121 SW Broadway, Suite 111

Portland, OR 97201

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name b. Address c. Relationship to Committee

STAND FOR CHILDREN, INC 2121 SW Broadway, Suite 111 Connected

Portland, OR 97201

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. <u>Name</u> b. <u>Address</u>

WELLS FARGO 1640 NW 19th Avenue

Portland, OR 97209