STATEMENT OF ORGANIZATION		OFFICE USE ONLY
1. Name and Address of Committee	2. Date of this Statement	Report Number: 56179 Date Filed: 1/21/2016
COMMITTEE TO ELECT PHILLIP DEVILLIER	1/21/201	5
PO BOX 409 EUNICE, LA 70535	3. Estimated Membership	
	10	
		_
Check If: New Committee	4. Amended Statement? Yes X N	
5. All Committee Officers and Directors (including Chairperson, Treas a. <u>Name</u> b. <u>Position</u>	surer, if any, and any other committe c. <u>Address</u>	e officers and directors)
CHAIRPERSON Chairpers	on PO BOX 409	
CHRISTOPHER B DEVILLIER	EUNICE, LA 705	35
TREASURER DWAYNE Treasurer		
CORMIER		25
	EUNICE, LA 705	66
 7. All Depositories for Committee Funds (committee funds must be domutual funds.) a. <u>Name</u> b. <u>Address</u> On attached sheet 	leposited in one or more banks or sa	vings and loan institutions or money market
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:	a. Check one: X Princi	pal Campaign Committee Subsidiary Committee
b. Name of Candidate PHILLIP DEVILLIER		. Office Sought by the Candidate HOUSE OF REPRESENTATIVES, DISTRICT
		41
9. a. Name of Person Preparing Report AMANDA GUID b. Daytime Telephone 225-767-7163	DRY MALOY	
10. WE HEREBY CERTIFY that the information contained in this STA information and belief.	ATEMENT OF ORGANIZATION is tr	ie and correct to the best of our knowledge ,
This 21st day of January ,	2016	
CHRISTOPHER B DEVILLIER		
Signature of Committee/Chairperson		Daytime Telephone
DWAYNE CORMIER		

- 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>

TRI-PARISH BANK

PO BOX 1029 EUNICE, LA 70535