

<b>STATEMENT OF ORGANIZATION</b>		<b>OFFICE USE ONLY</b>										
<b>1. Name and Address of Committee</b>  LAMBERT C. BOISSIERE, III 421 Loyola Ave., Suite 208 New Orleans, LA 7011	<b>2. Date of this Statement</b>  <div style="text-align: center;">1/25/2019</div>	<b>Report Number:</b> 74066  <b>Date Filed:</b> 1/25/2019  										
Check If: New Committee _____	<b>3. Estimated Membership</b>  <div style="text-align: center;">0</div>											
	<b>4. Amended Statement?</b>  <div style="text-align: center;"> <input type="checkbox"/> Yes      <input checked="" type="checkbox"/> No         </div>											
<b>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 20%;"><u>b. Position</u></th> <th style="text-align: left; width: 50%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>LAMBERT BOISSIERE, JR.</td> <td>Chairperson</td> <td>2358 LAKE OAKS PARKWAY  NO, LA 70122</td> </tr> <tr> <td>TREASURER KRISTI AUGUST</td> <td>Treasurer</td> <td>2344 LEON C SIMON DR  NO, LA 70122</td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	LAMBERT BOISSIERE, JR.	Chairperson	2358 LAKE OAKS PARKWAY  NO, LA 70122	TREASURER KRISTI AUGUST	Treasurer	2344 LEON C SIMON DR  NO, LA 70122
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<b>6. Affiliated Organizations</b> (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 30%;"><u>b. Address</u></th> <th style="text-align: left; width: 40%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3" style="height: 40px;"> </td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
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<b>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.)</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 30%;"><u>a. Name</u></th> <th style="text-align: left; width: 70%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2" style="height: 40px;"> </td> </tr> </tbody> </table>				<u>a. Name</u>	<u>b. Address</u>							
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<b>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:</b> a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee												
<b>b. Name of Candidate</b>		<b>c. Office Sought by the Candidate</b>										
<b>9. a. Name of Person Preparing Report</b> PREPARER BRIDGETTE JOSEPH  <b>b. Daytime Telephone</b> 404-401-8018												
<b>10. WE HEREBY CERTIFY</b> that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief.  This    25th    day of    January    ,    2019    .  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top; padding: 10px;"> <u>LAMBERT BOISSIERE, JR.</u>            Signature of Committee/Chairperson         </td> <td style="width: 50%; vertical-align: top; padding: 10px;"> <u>504-415-9923</u>            Daytime Telephone         </td> </tr> <tr> <td style="vertical-align: top; padding: 10px;"> <u>KRISTI AUGUST</u>            Signature of Committee Treasurer , if any         </td> <td style="vertical-align: top; padding: 10px;"> <u>504-931-6018</u>            Daytime Telephone         </td> </tr> </table>				<u>LAMBERT BOISSIERE, JR.</u> Signature of Committee/Chairperson	<u>504-415-9923</u> Daytime Telephone	<u>KRISTI AUGUST</u> Signature of Committee Treasurer , if any	<u>504-931-6018</u> Daytime Telephone					
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