


STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee MANDIE LANDRY CAMPAIGN COMMITTEE 2633 Peniston Street New Orleans, LA 70115 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/28/2021</div> 3. Estimated Membership <div style="text-align: center;">0</div> 4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	Report Number: 94997 Date Filed: 1/28/2021 <div style="text-align: right;">  </div>									
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Position</u></td> <td style="width: 33%;"><u>c. Address</u></td> </tr> <tr> <td style="text-align: center;">MANDIE LANDRY</td> <td style="text-align: center;">Chairperson</td> <td style="text-align: center;">2633 Peniston Street New Orleans, LA 70115</td> </tr> <tr> <td></td> <td style="text-align: center;">Treasurer</td> <td></td> </tr> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	MANDIE LANDRY	Chairperson	2633 Peniston Street New Orleans, LA 70115		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>									
MANDIE LANDRY	Chairperson	2633 Peniston Street New Orleans, LA 70115									
	Treasurer										
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> <td style="width: 33%;"><u>c. Relationship to Committee</u></td> </tr> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>									
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.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> </tr> </table> <p style="text-align: center;">On attached sheet</p>			<u>a. Name</u>	<u>b. Address</u>							
<u>a. Name</u>	<u>b. Address</u>										
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
b. Name of Candidate	c. 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 this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief. This <u>28th</u> day of <u>January</u> , <u>2021</u> . <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;"> <u>Mandie Landry</u> Signature of Committee/Chairperson </td> <td style="width: 50%; text-align: center;"> <u>504.680.6061</u> Daytime Telephone </td> </tr> <tr> <td style="text-align: center;"> _____ Signature of Committee Treasurer , if any </td> <td style="text-align: center;"> _____ Daytime Telephone </td> </tr> </table>			<u>Mandie Landry</u> Signature of Committee/Chairperson	<u>504.680.6061</u> Daytime Telephone	_____ Signature of Committee Treasurer , if any	_____ Daytime Telephone					
<u>Mandie Landry</u> Signature of Committee/Chairperson	<u>504.680.6061</u> Daytime Telephone										
_____ Signature of Committee Treasurer , if any	_____ Daytime Telephone										

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

THE FIRST BANK AND TRUST

b. Address

909 POYDRAS ST.
#100
NEW ORLEANS, LA 70112