

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee COMMITTEE TO ELECT LEILA J. EAMES 5420 Eastover Drive S. New Orleans, LA 70128 Check If: New Committee <input type="checkbox"/>	2. Date of this Statement <div style="text-align: center;">1/31/2023</div> 3. Estimated Membership <div style="text-align: center;">2</div> 4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	<div style="text-align: right;"> Report Number: 108202 Date Filed: 1/31/2023 </div> <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-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>DANA HENRY</td> <td>Chairperson</td> <td>7600 Hansbrough Street New Orleans, LA 70127</td> </tr> <tr> <td>MAPLE GAINES</td> <td>Treasurer</td> <td>2826 Castiglione Street New Orleans, LA 70119</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	DANA HENRY	Chairperson	7600 Hansbrough Street New Orleans, LA 70127	MAPLE GAINES	Treasurer	2826 Castiglione Street New Orleans, LA 70119
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MAPLE GAINES	Treasurer	2826 Castiglione Street New Orleans, LA 70119									
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-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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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-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; vertical-align: bottom;">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	On attached sheet						
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input checked="" type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
b. Name of Candidate LEILA EAMES	c. Office Sought by the Candidate School Board Member										
9. a. Name of Person Preparing Report KRYSTAL ANCAR b. Daytime Telephone --											
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>31st</u> day of <u>January</u> , <u>2023</u> . <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>Dana Henry</u> Signature of Committee/Chairperson </div> <div style="width: 45%;"> -- Daytime Telephone </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <u>Maple Gaines</u> Signature of Committee Treasurer , if any </div> <div style="width: 45%;"> -- Daytime Telephone </div> </div>											

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

HANCOCK WHITNEY BANK

b. Address

2510 14th St
Gulfport, MS 39501