STATEMENT OF ORGANIZATION		OFFICE USE ONLY
Name and Address of Committee	2. Date of this Statement	
Southern Glazers Louisiann PAC	PMB / 1/31/2023	
P.O. Box 44032	Estimated Membership	
Baton Roya H 70804	2	
is to set the get by your	4. Amended Statement?	
Check If: New Committee	YesNo	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)		
a. Name b. Position c. Address		
Ryan Hayniz Chairperson P.O. Boy 44037, Baton Rome & 70804		
Ryan Harnic Treasurer Pro. Box 44032, Bob Royn U 70004		
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)		
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
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>		
New Honizons Bunk 3555 Penkins Rd., Baton Roya Ut 7000+		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: Principal Campaign Committee Subsidiary Committee		
b. Name of Candidate		c. Office Sought by the Candidate
9. a. Name of Person Preparing Report Ryan Haynie	HAN	ND DELIVERED
b. Daytime Telephone 337-654-1515		
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 31 day of Januay , 202	3	ETHICS BOOKD REC'D
	32	7-654-1515
Signature of Committee Chairperson		ime Telephone Number
	33	7-654-1515
Signature of Committee Treasurer, if any	Day	time Telephone Number