| 1. Name and Address of Committee 2. Date of this Statement 1/8/2024 SUGAR PAC 2. Date of this Statement 1/8/2024 9. D graver 938 11 4. Amended Statement? 11 4. Amended Statement? 11 4. Amended Statement? 11 Check If: New Committee No 11 5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name b. Position c. Address FRANKIE SOTILE Chairperson 7809 Hwy 18, , St James, LA 70086 70002 JOHN CONSTANT Treasurer P O Box 938, , Thibodaux, LA 70302 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address On attached sheet 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 b. Address On attached sheet 8. Type of Committee Support Committee funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. | STATEMENT OF ORGANIZ | | OFFICE USE ONLY Report Number: 117847 | | | |
|---|--|-------------------------------------|---------------------------------------|--------------|--|--|
| Image: Check II: New Committee Image: Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name b. Position c. Address FRANKIE SOTILE Chairperson 7809 Hwy 18, , St James, LA 70086 JOHN CONSTANT Treasurer P O Box 938, , Thibodaux, LA 70302 6. Affiliated Organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address c. Relationship to Committee On attached sheet 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 b. Address On attached sheet 5. Type of Committee 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. | | | Date Filed: 1/8/2024 | 7847 | | |
| Check If: New Committee Yes X_No 5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) . a. Name b. Position c. Address FRANKIE SOTILE Chairperson 7809 Hwy 18, , St James, LA 70086 JOHN CONSTANT Treasurer P O Box 938, , Thibodaux, LA 70302 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address c. Relationship to Committee On attached sheet . 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 b. Address On attached sheet 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all that apply AND complete 8a and 8b below: | P O Drawer 938 | | 11 | | | |
| S. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) a. Name | | 4. Amended Statement? | — | | | |
| a. Name b. Position c. Address FRANKIE SOTILE Chairperson 7809 Hwy 18, , St James, LA 70086 JOHN CONSTANT Treasurer P O Box 938, , Thibodaux, LA 70302 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address c. Relationship to Committee On attached sheet 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 b. Address On attached sheet S. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of Which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signa | Check If: New Committee | <u>Yes X</u> | lo | | | |
| JOHN CONSTANT Treasurer P O Box 938, , Thibodaux, LA 70302 6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. a. Name b. Address c. Relationship to Committee On attached sheet . . 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 b. Address On attached sheet 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all that apply AND complete 8a and 8b below: . By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. . By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. . By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | | | | | | |
| | FRANKIE SOTILE Chairperso | ^{on} 7809 Hwy 18, , St Jan | nes, LA 70086 | | | |
| (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) a. Name b. Address On attached sheet 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. Name b. Address On attached sheet . 8. Name b. Address On attached sheet . 8. Type of Committee . IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | JOHN CONSTANT Treasurer | P O Box 938, , Thibod | aux, LA 70302 | | | |
| On attached sheet 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 b. Address On attached sheet 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a. | (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this 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. Name b. Address On attached sheet 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | | | c. Relationship to Commi | ttee | | |
| On attached sheet 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | 7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market | | | | | |
| 8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | a. <u>Name</u> b. <u>Address</u> | | | | | |
| IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below: By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is the subsidiary of which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | On attached sheet | | | | | |
| which is a committee of the candidate referenced in 8a. By my signature below, I hereby certify that this committee is not the principal or subsidiary committee the candidate referenced in 8a and that | IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDI | | • | | | |
| | | | | | | |
| | | | | | | |
| By my signature below, I hereby certify that this committee is organized solely to make independent expenditures and is not, and will not, make contributions (direct or in-kind as defined in R.S. 18:1483(6), in contravention of the Campaign Finance Disclosure Act. | | | | | | |
| IF THE POLITICAL COMMITTEE SUPPORTS MULTIPLE CANDIDATES, CHECK <u>ONLY IF THE following</u> applies: X By my signature below, I hereby certify that this committee is organized solely to make independent expenditures and is not, and will not, make contributions (direct or in-kind as defined in R.S. 18:1483(6), in contravention of the Campaign Finance Disclosure Act. | | | | | | |
| 8a. Name of Candidate 8b. Office Sought by the Candidate | 8a. Name of Candidate | | 8b. Office Sought by the Candidate | | | |
| | | | | | | |
| 9. a. Name of Person Preparing Report: JOHN P CONSTANT b. Daytime Telephone: 985-448-3707 | 9. a. Name of Person Preparing Report: JOHN P CONSTAN | 11 | b. Daytime Telephone: | 985-448-3707 | | |
| 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 8th day of January , 2024 . | This 8th ^{day of} January , 2 | 2024 . | | | | |
| Frankie Sotile John Constant 985-448-3707 Signature of Committee/Chairperson Daytime Telephone Signature of Committee Treasurer, if any Daytime Telephone | | | | | | |

Form 200, Rev. 12/03, Page Rev. 6/2023

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 |
|---------------------|---------------------|------------------------------|
| AMERICAN SUGAR CANE | P O Drawer 938 | Authorizing Organization |
| LEAGUE | Thibodaux, LA 70302 | |

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>

1ST AMERICAN BANK

P O Box 550 Vacherie, LA 70790