STATEMENT OF ORGANIZATION		OFFICE USE ONLY Report Number: 46483
Name and Address of Committee	2. Date of this Statement	Date Filed: 1/19/2015
MICHAEL S. YENNI P.O. Box 640938 Kenner, LA 70064	1/18/2015	Report Number: 46483 Date Filed: 1/19/2015
	3. Estimated Membership	
	5	
Check If:	4. Amended Statement?	
New Committee	YesX_No	
All Committee Officers and Directors (including Chairperson, Treasurer, a. <u>Name</u> b. <u>Position</u>	if any, and any other committee c. <u>Address</u>	e officers and directors)
WILLIAM P CONNICK Chairperson	3421 N. Causewa Suite 408 Metairie, LA 7000	
Treasurer	,	
Affiliated Organizations (Any organization, other than a political committee, which directly or indi	rectly established, administers,	or financially supports this committee.)
a. <u>Name</u> b. <u>Address</u>		c. Relationship to Committee
 All Depositories for Committee Funds (committee funds must be deposit mutual funds.) 	ted in one or more banks or savi	ings and loan institutions or money market
a. <u>Name</u> b. <u>Address</u>		
On attached sheet		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a.	Check one: X Principa	al Campaign Committee Subsidiary Committee
b. Name of Candidate	c.	Office Sought by the Candidate
9. a. Name of Person Preparing Report CYNTHIA AUSTIN	L	
b. Daytime Telephone 504-450-8722		
10. WE HEREBY CERTIFY that the information contained in this STATEMI information and belief.	ENT OF ORGANIZATION is true	e and correct to the best of our knowledge ,
This 19th day of January , 2015	; .	
Michael S. Yenni Signature of Committee/Chairperson	_	504-616-3892 Daytime Telephone
orginatare of committee/orian/person		Dayano Telephone
Signature of Committee Treasurer, if any	<u> </u>	Daytime Telephone

Form 200, Rev. 12/03

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

REGIONS BANK 810 W. Esplanade Ave. Kenner, LA 70065