STATEMENT OF ORGANIZATION		OFFICE USE ONLY  Report Number: 67579
Name and Address of Committee	2. Date of this Statement	Date Filed: 1/13/2018
MICHAEL S. YENNI CAMPAIGN P.O. Box 640938	1/13/2018	
Kenner, LA 70064	3. Estimated Membership	
		5
Check If:	4. Amended Statement?	_
New Committee	Yes X No	
All Committee Officers and Directors (including Chairperson, Treasure     a. Name     b. Position	er, if any, and any other committe	e officers and directors)
EDWARD MARTINA, III. Chairperson	100 Genna Lane	
	Youngsville, LA 7	0592
RYAN KRUSE Treasurer	4812 Wade Dr.	
Metairie, LA 70003		
Affiliated Organizations     (Any organization, other than a political committee, which directly or in a. Name     b. Address	directly established, administers,	or financially supports this committee.) c. Relationship to Committee
7. All Depositories for Committee Funds (committee funds must be depo mutual funds.)  a. Name  b. Address	sited in one or more banks or sav	ings and loan institutions or money market
On attached sheet		
	- Ohaali amaa XA Dainain	Cub idian Committee
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:	a. Check one: X Princip	al Campaign Committee Subsidiary Committee ——
b. Name of Candidate  MICHAEL S YENNI	C	. Office Sought by the Candidate Parish President
9. a. Name of Person Preparing Report  CYNTHIA AUSTIN  b. Daytime Telephone  504-450-8722		
10. WE HEREBY CERTIFY that the information contained in this STATE information and belief.	MENT OF ORGANIZATION is tru	e and correct to the best of our knowledge ,
	10	
This 13th day of January , 20°		
Edward Martina, III. Signature of Committee/Chairperson		225-276-3306  Daytime Telephone
Ryan Kruse Signature of Committee Treasurer, if any		504-813-7389  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.)

b. Address

a. Name

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

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