STATEMENT OF ODCANIZATION		OFFICE USE ONLY
STATEMENT OF ORGANIZATION		
Name and Address of Committee	2. Date of this Statement	Date Filed: 1/8/2024
ALL IN PAC 1019 ERATO STREET NEW ORLEANS, LA 70130	1/8/2024 3. Estimated Membership	Report Number: 117843 Date Filed: 1/8/2024
NEW ORLEANS, EXTORES	50	0
Check If: New Committee	4. Amended Statement? Yes X No	
	<u> </u>	
 All Committee Officers and Directors (including Chairperson, Treasurer, a. Name b. Position 	, if any, and any other committe c. <u>Address</u>	e officers and directors)
ELIZABETH MONAGHAN Chairperson	1019 ERATO STREET,	, NEW ORLEANS, LA 70130
Treasurer		
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>		
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 and that the committee is not working, and will not work, in coordination, consultation, or cooperation with the candidate referenced in 8a.		
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 ONLY IF THE following applies: 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	3	Bb. Office Sought by the Candidate
a. Name of Person Preparing Report: AMANDA MALOY		b. Daytime Telephone: 225-413-6486
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	<u>4</u> .	
ELIZABETH MONAGHAN 917-365-72	12	

Signature of Committee/Chairperson
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Signature of Committee Treasurer, if any

Daytime Telephone

Daytime Telephone

- 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

HANCOCK WHITNEY BANK

5335 TCHOUPITOULAS NEW ORLEANS, LA 70115