

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee MICHAEL S. YENNI P.O. Box 640938 Kenner, LA 70064 Check If: New Committee _____	2. Date of this Statement 1/18/2015	Report Number: 46483 Date Filed: 1/19/2015 									
	3. Estimated Membership 5										
	4. Amended Statement? ☐ Yes ☒ No										
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Position</u></td> <td style="width: 34%;"><u>c. Address</u></td> </tr> <tr> <td style="text-align: center;">WILLIAM P CONNICK</td> <td style="text-align: center;">Chairperson</td> <td style="text-align: center;">3421 N. Causeway Blvd. Suite 408 Metairie, LA 70002</td> </tr> <tr> <td></td> <td style="text-align: center;">Treasurer</td> <td></td> </tr> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	WILLIAM P CONNICK	Chairperson	3421 N. Causeway Blvd. Suite 408 Metairie, LA 70002		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>									
WILLIAM P CONNICK	Chairperson	3421 N. Causeway Blvd. Suite 408 Metairie, LA 70002									
	Treasurer										
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> <td style="width: 34%;"><u>c. Relationship to Committee</u></td> </tr> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>									
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.) <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><u>a. Name</u></td> <td style="width: 33%;"><u>b. Address</u></td> <td></td> </tr> </table> On attached sheet			<u>a. Name</u>	<u>b. Address</u>							
<u>a. Name</u>	<u>b. Address</u>										
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 CYNTHIA AUSTIN b. Daytime Telephone 504-450-8722											
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 19th day of January , 2015 . <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;"> <u>Michael S. Yenni</u> Signature of Committee/Chairperson </td> <td style="width: 50%; text-align: center;"> <u>504-616-3892</u> Daytime Telephone </td> </tr> <tr> <td style="text-align: center;"> _____ Signature of Committee Treasurer , if any </td> <td style="text-align: center;"> _____ Daytime Telephone </td> </tr> </table>			<u>Michael S. Yenni</u> Signature of Committee/Chairperson	<u>504-616-3892</u> Daytime Telephone	_____ Signature of Committee Treasurer , if any	_____ Daytime Telephone					
<u>Michael S. Yenni</u> Signature of Committee/Chairperson	<u>504-616-3892</u> Daytime Telephone										
_____ Signature of Committee Treasurer , if any	_____ 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

REGIONS BANK

b. Address

810 W. Esplanade Ave.
Kenner, LA 70065