

<b>STATEMENT OF ORGANIZATION</b>		<b>OFFICE USE ONLY</b>												
<b>1. Name and Address of Committee</b>  MICHAEL S. YENNI P.O. Box 640938 Kenner, LA 70064  Check If: New Committee _____	<b>2. Date of this Statement</b>  <div style="text-align: center;">7/20/2015</div>	<b>Report Number:</b> 49638  <b>Date Filed:</b> 7/20/2015  												
	<b>3. Estimated Membership</b>  <div style="text-align: center;">5</div>													
	<b>4. Amended Statement?</b>  <div style="text-align: center;"> <input checked="" type="checkbox"/> Yes      <input type="checkbox"/> No </div>													
<b>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</b> <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: 33%;"><u>c. Address</u></td> </tr> <tr> <td>HENRY R TRAPANI</td> <td>Chairperson</td> <td>8901 - 33rd Street</td> </tr> <tr> <td></td> <td></td> <td>Metairie, LA 70003</td> </tr> <tr> <td></td> <td>Treasurer</td> <td></td> </tr> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	HENRY R TRAPANI	Chairperson	8901 - 33rd Street			Metairie, LA 70003		Treasurer	
<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>												
HENRY R TRAPANI	Chairperson	8901 - 33rd Street												
		Metairie, LA 70003												
	Treasurer													
<b>6. Affiliated Organizations</b> (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: 33%;"><u>c. Relationship to Committee</u></td> </tr> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>									
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<b>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>  <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> </tr> </table> <p style="text-align: center;">On attached sheet</p>			<u>a. Name</u>	<u>b. Address</u>										
<u>a. Name</u>	<u>b. Address</u>													
<b>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:</b> a. Check one: <input checked="" type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee														
<b>b. Name of Candidate</b>  MICHAEL S. YENNI	<b>c. Office Sought by the Candidate</b>  Michael S. Yenni Campaign													
<b>9. a. Name of Person Preparing Report</b> CYNTHIA AUSTIN  <b>b. Daytime Telephone</b> 504-450-8722														
<b>10. WE HEREBY CERTIFY</b> that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief.  This    20th    day of    July    ,    2015    .  <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>Henry R Trapani</u>  Signature of Committee/Chairperson </div> <div style="width: 45%;"> _____  Daytime Telephone </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> _____  Signature of Committee Treasurer , if any </div> <div style="width: 45%;"> _____  Daytime Telephone </div> </div>														

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