

STATEMENT OF ORGANIZATION		OFFICE USE ONLY
1. Name and Address of Committee LA RESTUARANT ASSOC PAC 2700 N Arnoult Rd Metairie, LA 70002 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/3/2017</div>	Report Number: 61644 Date Filed: 1/12/2017
	3. Estimated Membership <div style="text-align: center;">2440</div>	
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>	
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Position</u> c. <u>Address</u> </div> <div style="text-align: center; margin-top: 10px;">Chairperson</div> <div style="text-align: center; margin-top: 10px;">Treasurer</div> <div style="text-align: center; margin-top: 10px;">Additional officers listed on attached sheet</div>		
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Address</u> c. Relationship to Committee </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.) <div style="display: flex; justify-content: space-between;"> a. <u>Name</u> b. <u>Address</u> </div>		
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee		
b. Name of Candidate		c. Office Sought by the Candidate
9. a. Name of Person Preparing Report BRIDGIT BELLINI b. Daytime Telephone 504-454-2277		
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 12th day of January , 2017 . <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <u>Mark Latter</u> Signature of Committee/Chairperson </div> <div style="width: 45%;"> <u>504-454-2277</u> 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>		

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name

b. Position

c. Address

STAN HARRIS

Officer

2700 N Arnoult Rd
Metairie, LA 70002

COMMITTEES WITH OVER 250 MEMBERS

The following certification is OPTIONAL and should be completed ONLY if it is applicable to your committee . Completion of this certification doubles the normal limitations on the amounts of contributions to candidates that are otherwise applicable to political committees.

11. WE HEREBY CERTIFY that the membership of this political committee exceeded two hundred fifty (250) members **as of December 31 of the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.** We further certify that at least two hundred fifty (250) of the members of this political committee contributed at least fifty dollars (\$50.00) to this committee **during the calendar year immediately preceding the date of this STATEMENT OF ORGANIZATION.**

This 12th day of January, 2017 .

Mark Latter

Signature of Committee/Chairperson

504-454-2277

Daytime Telephone

Signature of Committee Treasurer, if any

Daytime Telephone

Form 200, Rev. 3/98. Page Rev.10/02, Page Rev. 6/2008