

STATEMENT OF ORGANIZATION		OFFICE USE ONLY									
1. Name and Address of Committee Keep the Lights On PO Box 750823 New Orleans, LA 70175	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">2. Date of this Statement 09/26/2023</td> </tr> <tr> <td style="padding: 5px;">3. Estimated Membership 10</td> </tr> <tr> <td style="padding: 5px;">4. Amended Statement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	2. Date of this Statement 09/26/2023	3. Estimated Membership 10	4. Amended Statement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
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4. Amended Statement? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
Check If: <u>New Committee</u>											
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left; padding: 2px;">a. <u>Name</u></th> <th style="width: 30%; text-align: left; padding: 2px;">b. <u>Position</u></th> <th style="width: 40%; text-align: left; padding: 2px;">c. <u>Address</u></th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Elizabeth Russell</td> <td style="padding: 2px;">Chairperson</td> <td style="padding: 2px;">P.O. Box 750823, New Orleans, LA 70175</td> </tr> <tr> <td style="padding: 2px;">Jack Pratt</td> <td style="padding: 2px;">Treasurer</td> <td style="padding: 2px;">555 12th St. NW, Washington, D.C. 20004</td> </tr> </tbody> </table>			a. <u>Name</u>	b. <u>Position</u>	c. <u>Address</u>	Elizabeth Russell	Chairperson	P.O. Box 750823, New Orleans, LA 70175	Jack Pratt	Treasurer	555 12th St. NW, Washington, D.C. 20004
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Elizabeth Russell	Chairperson	P.O. Box 750823, New Orleans, LA 70175									
Jack Pratt	Treasurer	555 12th St. NW, Washington, D.C. 20004									
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)											
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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.)											
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8. Type of Committee IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check <u>all</u> that apply AND complete 8a and 8b below:											
<input type="checkbox"/> By my signature below, I hereby certify that this committee is the principal campaign committee of the candidate referenced in 8a.											
<input type="checkbox"/> By my signature below, I hereby certify that this committee is the subsidiary of the following committee of the candidate referenced in 8a _____											
<input type="checkbox"/> 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.											
<input type="checkbox"/> 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:											
<input checked="" type="checkbox"/> 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	8b. Office Sought by the Candidate										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;"> 9. a. Name of Person Preparing Report: <u>Jack Pratt</u> </td> <td style="width: 40%; padding: 2px;"> b. Daytime Telephone: <u>202-494-1390</u> </td> </tr> </table>			9. a. Name of Person Preparing Report: <u>Jack Pratt</u>	b. Daytime Telephone: <u>202-494-1390</u>							
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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 <u>26</u> day of <u>September</u> , 2023											
	<u>504-289-6190</u>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 2px;"> </td> <td style="width: 50%; text-align: center; padding: 2px;"> <u>202-494-1390</u> </td> </tr> </table>		<u>202-494-1390</u>							
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Signature of Committee Chairperson	Daytime Telephone Number	Signature of Committee Treasurer, if any									
Daytime Telephone Number	Daytime Telephone Number	Daytime Telephone Number									