

STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee
 Louisiana Orthopaedic Political Action Committee
 P.O. Box 80053
 Baton Rouge, LA 70898

2. Date of this Statement
 5/28/2024

3. Estimated Membership
 100

4. Amended Statement?
 Yes No

Check If: New Committee

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

a. Name	b. Position	c. Address
Daniel Gallagher MD	Chairperson	2600 Belle Chasse Highway Gretna LA 70056
Neil Duplantier MD	Treasurer	2600 Belle Chasse Highway Gretna LA 70056

6. Affiliated Organizations
 (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name	b. Address	c. Relationship to Committee
Louisina Orthopaedic Association	110 West Road #227 Towson MD 21204	Parent

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
Regions Bank	3003 College Drive, Baton Rouge LA 70808

8. Type of Committee
 IF THE POLITICAL COMMITTEE SUPPORTS ONLY ONE CANDIDATE, check all 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.

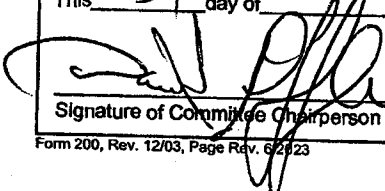
8a. Name of Candidate

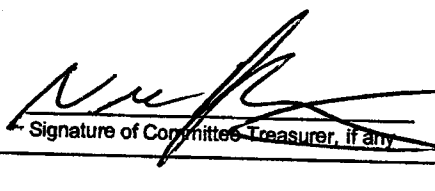
8b. Office Sought by the Candidate

9. a. Name of Person Preparing Report: Cindy Bishop b. Daytime Telephone: 225 933 5435

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 31 day of May 2024.


 Signature of Committee Chairperson 504 391 ~~7460~~ ⁷⁶⁷⁰
 Daytime Telephone Number


 Signature of Committee Treasurer, if any 504 391 ~~7460~~ ⁷⁶⁷⁰
 Daytime Telephone Number

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.

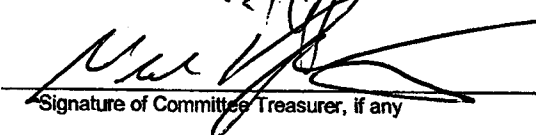
This 31 day of May 2024



Signature of Committee Chairperson

7670
504 391 7460

Daytime Telephone Number



Signature of Committee Treasurer, if any

7670
504 391 7460

Daytime Telephone Number

INSTRUCTIONS

READ ALL INSTRUCTIONS CAREFULLY. PRINT OR TYPE ALL INFORMATION LEGIBLY IN BLACK INK.

- A committee check for the \$100 filing fee must accompany the Statement of Organization and be made payable to "Campaign Finance."
- This form must be filed every year between January 1 and January 31, subject to the following exceptions:
 - If a committee organizes after January 31, then this form must be filed within 10 days of the date of organization.
 - If the committee organizes within 10 days prior to an election, then this form must be filed within 3 days of the date of organization.
 - If the committee does not anticipate that it will have over \$500 in total financial activity for a particular calendar year, it is not required to file this form for that year. If it determines later in that year that it will exceed \$500 in total financial activity, then this form must then be filed within 10 days.
- A Certificate of Registration will be issued to each properly organized committee.
- A committee that has over \$500 of financial activity in a calendar year and does not file a Statement of Organization is subject to fines.
- Mail the Statement of Organization along with the required fee to:

CAMPAIGN FINANCE
Post Office Box 4368
Baton Rouge, Louisiana 70821